# CHAPTER 3: STUDENT IDENTIFICATION PROCESS

#### LEARNER OUTCOMES

At the conclusion of this chapter, you will be able to:

• Develop a process that includes a minimum of two data sources to accurately identify students with internalizing and/or externalizing social, emotional or behavioral risk factors.

## Systematic and Early Identification

Multiple strategies can be used to identify students for Tier 2 supports. Example identification tools can include office discipline referrals, screening instrument scores, teacher nominations, parent and support service recommendations, and formative assessments. It is not necessary to exhaust all possible identification methods, however no single method is likely to identify all students who may need Tier 2 supports. It is recommended that schools select and use multiple techniques. Ideally, the process is developed so that all students have an equal chance to be considered for risk at least annually and preferably more than once per school year. Finally, the identification methods selected should be efficient in terms of cost and time requirements from school personnel.

It is worth noting-one of the foundational principles of an RtI model is when large numbers of students are exhibiting similar challenges, the school-based problemsolving team should focus problem-solving on Tier 1 as a priority before identifying students whose needs may warrant immediate supplemental or intensive services which require more complex and expensive supports.

Therefore, it is important for school-based problemsolving teams to consider whether a student's behavior or performance is different than peers in the same environment. If many students in the same classroom are identified or direct observation of the classroom indicates that critical curricular, behavior management, and instructional components are missing from or ineffectively implemented in the classroom, then modification of classroom supports should be addressed prior to planning for and providing supplemental supports.

**Externalizing** behaviors are behavior problems that are observable and overt, often directed toward people and/or objects in the social environment (Walker and Severson, 1991). Behavior problems in the externalizing dimension are exhibited at high rates and/or intensity and are considered inappropriate in school settings. Examples of externalizing behaviors include, but are not limited to: talking out, non-compliance, out of seat, disturbing others, talking back, rude comments to peers, along with more serious behavior such as aggression toward people, destruction of property, theft, and serious violation of rules (Walker, Colvin, Ramsey, 2004).

An effective identification process should generate information for students experiencing externalizing and/or internalizing behaviors.

In addition, children and youth with the following characteristics should also be identified and considered for additional support. Students who: 1) present many classroom challenges, 2) experience in-class consequences but do not receive office discipline referrals, 3) are identified with disabilities but may still need additional social, emotional or behavioral supports, and 4) are recommended by faculty, parents or support professional.

Systematic identification can be conducted in several different ways. Examples include regular monitoring of **existing school data** that is indicative of risk, use of a systematic **teacher nomination process** that can be accessed at any time and also is scheduled to occur during designated cut points of the school year, and/ or implementation of a teacher, student or parent rating process that incorporates standardized screening instruments.

Initially, schools may be concerned about lacking sufficient interventions, personnel, or other resources to simultaneously address the needs of every student identified through the use of a school- wide screening process. School-based problem-solving teams should develop a method for prioritizing students according to their level of need.

Ultimately the goal is development of a clearly defined, methodical process that allows all students to be considered, promotes early identification of students who are at-risk for poor outcomes, and identifies youth who may be experiencing internalizing and/or externalizing concerns. **Internalizing** behaviors are behavior problems that the student directs inwardly toward him or herself. Internalizing behaviors are often based on social deficits and avoidance (Walker and Severson, 1991). Examples of internalizing behaviors include, but are not limited to, (a) exhibiting shy, timid, or nonassertive behavior; (b) avoiding or withdrawing from social situations (e.g., not talking with peers; not participating in activities or games); and (c) non-responsiveness to social overtures from others (Walker, Colvin, Ramsey, 2004).

#### **TRANSFER STUDENTS**

Procedures need to be in place for students with multiple discipline referrals who transfer into your school. A team member, most likely the administrator, will need to review the student's record to determine if there are existing behavior concerns and if interventions were in place at the former school. If so, it is appropriate for the Tier 2 Team to review the information and determine if the student is a candidate for an intervention. If the student had been participating in a behavioral intervention, perhaps someone could visit with the student to determine his/her perception of the support. In most cases, the student will start without Tier 2 support to give him/her time to acclimate to a new school and new environment.

One consideration for transfer students is to ask, "What does our school do for new students who have been receiving academic support?" Perhaps you give them time to adjust to the new school and provide academic screening to determine their level of performance and if intervention is needed. If you have such a system in place, perhaps a parallel system can be established for new students with potential behavior concerns.

It is important that procedures are in place to teach all new students the rules, expectations, procedures, and routines of the schoolwide and classroom systems and for them to be recognized when they display the appropriate behaviors. Equally important is that adults establish positive relationships with new students. Additionally, consider assigning a new student ambassador who has similar interests to assist the student in getting acclimated to his/her new school.

After new students have had the opportunity to benefit from your school's Tier 1 universal supports, students who continue to struggle can be brought to the team's attention by data decision rules, nomination, and/or universal screening.

#### **BEGINNING OF SCHOOL YEAR**

Most students start a new school year without Tier 2 behavioral support. This is to give them time to adapt to new teachers and classroom environments. It is important for the teachers to know that a student had previously participated in an intervention so they can provide positive attention to him/her to get the year off to a good start. Perhaps the student can assist the teacher when the social/behavioral lessons are taught to the class. The goal of waiting is not to set a student up for failure but to give the teacher and student the opportunity to first be successful within the classroom environment. The Tier 2 Team closely monitors the

students and responds quickly if the data indicates a need to do so.

Sometimes teachers, parents, or even students will advocate that Tier 2 support is necessary for a student to be successful. In this case, the team can make a decision to have an intervention in place at the beginning of the year.

One consideration for starting the school year is to ask, "What does our school do at the beginning of the year for students who received academic intervention last year?" Perhaps you give them time to adjust to the new grade level and administer academic screenings to determine if intervention continues to be appropriate. If you have such a system in place, can a parallel system be established for students who participate in a behavioral intervention?

DISCUSSION

What are your procedures when a student transfers into your school who has received Tier 2 academic support in his/her previous school?

What are your procedures for determining if a student starts a school year participating in a Tier 2 academic intervention if he/she ended the previous year receiving that intervention?

After considering these questions, can similar procedures apply for Tier 2 behavioral interventions?

#### PLANNING FOR INTERVENTION - WHAT'S YOUR PROJECTED CAPACITY?

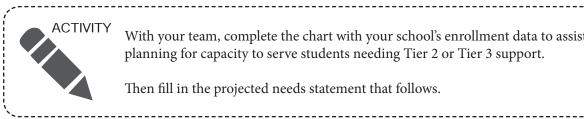
Early intervention is the goal for all students. Tier 1 Universal practices will be enough support for approximately 80% of the students in your school. This is the most efficient system of support, requiring minimal adult resources per student.

Tier 2 interventions are designed to proactively identify students at risk for developing problem behavior, or just beginning to exhibit problem behavior. When student identification is done effectively, you can estimate serving 10 - 15% of your student population over the course of the year in Tier 2 Interventions. Tier 2 Interventions require more adult involvement for fewer students, yet efficiently produce effective results when interventions are delivered with fidelity.

Students who are already exhibiting chronic problem behavior may require Tier 3 Intervention. If Tier 1 and Tier 2 are being implemented in the school setting with fidelity, your school may need to provide Tier 3 Interventions for approximately 1 -5% of students. Tier 3 requires the highest staff to student ratio, and can be a very labor-intensive process.

At Sample Middle School, the student population is 375 students. Based on the expected percentages in tiered intervention, 300 Sample students will use expected behaviors when the school implements Tier 1 Universal practices with fidelity. Approximately 37 – 56 Sample students may need additional support, or Tier 2 Intervention, to reliably perform expected behaviors. Finally, it is possible that 3 – 15 students may need the most intensive level of support, a Tier 3 Behavior Intervention Plan, over the course of the school year.

How do the percentages reflect the projected needs in your building?



With your team, complete the chart with your school's enrollment data to assist your planning for capacity to serve students needing Tier 2 or Tier 3 support.

Then fill in the projected needs statement that follows.

School:

Academic Year: \_\_\_\_\_

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

\_\_\_\_\_, the student population is At \_\_\_\_\_ \_\_\_\_\_\_ students. Based on the expected percentages in tiered intervention, \_\_\_\_\_\_ students will use expected behaviors when the school implements Tier 1 Universal practices with fidelity. Approximately \_\_\_\_\_\_ - \_\_\_\_\_ students may need additional support, or Tier 2 Intervention, to reliably perform expected behaviors.

Finally, it is possible that \_\_\_\_\_\_ – \_\_\_\_\_ students may need the most intensive level of support, a Tier 3 Behavior Intervention Plan, over the course of the school year.

## Nominations

DISCUSSION

An effective identification system will include a process that allows teachers, parents and/or students themselves to submit candidate names to be considered for Tier 2 supports. The following considerations will help teams as they make decisions to develop a nomination process or to revise an existing procedure.

- Designed for quick response; supports for classroom teacher and/or rapid access to intervention for student.
- ► Short and simple, requires less than 10 min to complete.
- ► Typically, a teacher makes the nomination but referrals can also come from parents, or the student.
- ► Staff is trained to consider and nominate students with internalizing and/or externalizing characteristics.
- ► Staff, students, and/or parents can make a nomination any time there is a concern.
- ► A staff nomination process is scheduled at designated points across the school year (e.g., near the end of the first grade reporting period) during which teachers are provided with a description of risk characteristics and asked to review a list of students in their class. Names of students who meet risk criteria are submitted.

Does your team already have a nomination form and process? If so, does information collected include:

- Identifying information about the student (gender, grade, IEP status)
- Academic performance data
- Information and data about problem behaviors
- Description of the problem
- Office discipline and/or classroom minor incidents
- List of strategies teacher has used to address the problem behaviors and how successful they have been
- Teacher perceptions regarding acquisition or performance deficits

Additional Questions to Consider:

- 1. How do teachers access the nomination form?
- 2. Who do teachers contact for questions and/or to receive assistance with the nomination process?
- 3. Who receives the completed nomination form?
- 4. How is the team notified when there is a new nomination?

ACTIVITY <sub>T</sub>

The next page provides an example of a school developed nomination form. Review the example then discuss it with your team. Consider your existing nomination and request for assistance process. Determine what adjustments or modifications need to be made to facilitate proactive, early identification.

#### **EXAMPLE TEACHER NOMINATION FOR ASSISTANCE**

Student Name	Age	Grade	_ IEP □ Yes □ No			
Teacher Completing		Date				
ACADEMIC INFORMATION						
Overall G.P.A	Do you believe that academic skills, including task completion, are impacting the problem behavior?					
Reading Grade						
Written Language Grade						
0 0	□ No					
Math Grade	□ Unsure					

#### WHAT IS THE PROBLEM BEHAVIOR?

#### **Internalizing Behaviors:**

- □ Exhibits sadness or depression
- $\Box$  Sleeps a lot
- $\Box$  Is teased or bullied by peers
- □ Does not participate in games
- $\Box$  Very shy or timid
- □ Acts fearful
- $\Box$  Does not stand up for self
- □ Self-injury (cutting, head banging)
- □ Withdrawn
- □ Other\_\_\_\_\_

#### **Externalizing Behaviors:**

- □ Out of seat/assigned area
- □ Inappropriate Language
- □ Fighting/physical aggression
- □ Talking out of turn
- □ Verbal defiance
- $\Box$  Not following instructions
- □ Technology violation
- □ Tardy
- □ Other \_\_\_\_\_

#### STRATEGIES TRIED TO ADDRESS PROBLEM BEHAVIOR AND RESULTS

	Successful	Somewhat Successful	Not Successful
Tangible recognition for expected behavior			
4:1 positive verbal feedback			
Retaught expected behavior			
Multiple opportunities to practice expected behavior			
Self-monitoring			
Modified assignments			
Change of schedule for activities			
Extra assistance			
Parent/Guardian contact			
Other (Specify):			

## **Existing School Data**

Existing school data can be used to develop decision rules that create an entry point for access to the school Tier 2 Team. Specifically, teams can set criteria that when "triggered" automatically initiates discussion about a student who may be at risk. After reviewing student data the Tier 2 Team can then determine if intervention is warranted.

To establish decision rules using existing school data, teams must first consider and document student data that already is routinely collected. Examples such as office discipline and/or classroom minor behavioral records, attendance and tardy rates, classroom assignment and/or homework completion rates and grades, and formative assessment results are common types of data most schools collect and can easily access to use for decision making.

For instance a school team may decide that once any student has received a certain number of office discipline referrals (e.g., 2, 3, 4, or 5), the Tier 2 Team automatically will schedule a review of that student's referrals and other relevant data to be discussed during the next Tier 2 Team meeting. Ideally the data triggers that teams establish will identify students who require more intensive assistance before their patterns of behavior have become a chronic or intensive problem. Thus, an important goal is establishing data triggers that support early identification of students who may be at risk for experiencing social, emotional and/or behavioral challenges.

One strategy for establishing reasonable decision rules is to examine previous years' student data. First, review the list of students who received documented office discipline referrals and consider which of those students your school would categorize as in the "at-risk", rather than "high risk", range. Next, identify the range of ODR incidence (i.e., lowest and highest numbers received by students perceived to be "at-risk"). Discuss this range and as a team determine the number of incidents that best depicts early signs of risk within your context. The number identified by team members can then be used as the data "trigger" for identifying at-risk students in your setting. The same process can be repeated for other types of commonly collected data.

The following are example data rules:

- ► 2 major ODRs from beginning of year;
- ► Minor incidents persist---5 after Sept 30;
- ► Fourth absence or tardy;
- ► Academic indicators that are below grade level;
- ► D or F in any course.

It is important for the Tier 2 Team to examine who within your school would be a good collector of

## **CAUTION!**

Use of existing school data tends to identify students with externalizing types of behaviors. Use of additional identification strategies (e.g., nominations and/or screening instrument scores) likely will be needed to draw out students at risk because of internalizing characteristics.

your informational data. It need not be the same person collecting each piece. Some pieces are readily available to some team members. Note the Example Existing School Data Inventory designates different persons assigned as being responsible for specific measure. The Intervention Coordinator will then have a completed School Data Inventory for the Tier 2 Team Meeting.

			EAAMPLE EAISTING SCHOOL DATA INVENTORI	NVENTORY	
Measure	Proficient Score	At-Risk	High Risk	Person Responsible	Date(s) to Review
1. ODR	0-1	2 or more	5 or more	Tier 1/Tier 2 Crossover Member	Monthly (Sept. 30, Oct. 29, Nov. 30, Dec. 18, Jan. 31, Feb. 27, March 30, April 29, May 25) coincide with monthly PBIS meetings
2. Classroom Minors	0-4	5 or more	15 or more	Tier 1/Tier 2 Crossover Member	Monthly (Sept. 30, Oct. 29, Nov. 30, Dec. 18, Jan. 31, Feb. 27, March 30, April 29, May 25) coincide with monthly PBIS meetings
3. Absences	< 5/trimester	5+/trimester	10/trimester	School Secretary	trimester (Nov. 21, Feb. 28, May 25)
4. Tardy	< 4/trimester	4+/trimester	10/trimester	School Secretary	trimester (Nov. 21, Feb. 28, May 25)
5. ISS	0-1	2-3	4 or more	School Secretary	Monthly (Sept. 30, Oct. 29, Nov. 30, Dec. 18, Jan. 31, Feb. 27, March 30, April 29, May 25) coincide with monthly PBIS meetings
6. OSS	o	1	7	School Secretary	Monthly (Sept. 30, Oct. 29, Nov. 30, Dec. 18, Jan. 31, Feb. 27, March 30, April 29, May 25) coincide with monthly PBIS meetings
7. Course Grades	2.5 or higher	D or F in any course	Ds or Fs in multiple courses	Classroom Teacher	Nov. 21, Feb. 28, May 25 to go with trimester and then Oct. 10, Jan. 12, April 3 <i>to be mid-trimester</i>
8. Reading Inventory	800+	799 or lower	599 or lower	Classroom Teacher	Nov. 21, Feb. 28, May 25
9. Writing Assessment	3 or 4	2	NS; 1	Classroom Teacher	Nov. 21, Feb. 28, May 25

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Make a list of all the academic and behavioral data collected in your school. Identify what is considered proficient for each measure, then determine what level of each measure is "at-risk" and "high-risk." Who would be a good choice for collecting that section of data?

Date(s) to Review				
Person Responsible				
High Risk				
At-Risk				
Proficient Score				
Measure				

**Existing School Data Inventory** 

## **Universal Screening Instrument**

A third method for systematically identifying students who may require additional support is use of a brief screening instrument. Typically, screening instruments require a response to short statements about emotional or behavioral characteristics of a student. These instruments can be used to generate risk scores for all students in a grade level, building or district. Use of a screening instrument at Tier 2 is designed for identification of students only and not for diagnostic purposes or progress monitoring.

There are a number of potential advantages for developing a systematic identification process that incorporates use of a standardized screening tool. First, responding to a screening questionnaire is generally perceived as a fast, efficient, and respectful process with capacity to include all children and youth of interest. Next, if an error occurs, most often it is on the side of caution with the tendency to over-identify rather than missing students or letting students fall through the cracks. Third, use of screening scores also informs schools about the needs of their particular student population which can assist with planning and resource mapping by finding groups of students with common needs. Finally, universal screening is recommended as an evidenced-based practice by a number of different influential groups associated with educational policy and practice (e.g., President's Commission on Special Education, 2002; No Child Left Behind Act, 2001; U.S. Public Health Service, 2000).

Unfortunately, there are a number of reasons why universal screening has not become a more common practice yet. The following list represents concerns that often are expressed:

- ▶ Behavior is viewed as purposeful rather than as associated with environmental arrangements.
- ► Historically schools tend to be reactive rather than proactive with respect to behavior.
- ► There is a widespread impression kids will "grow out of it" regarding problem behavior displayed during the early years of child development.
- ► Concerns about profiling or stigmatizing children and youth who meet risk criteria.
- ► Fear of costs and potential for identifying large numbers of students with Emotional or Behavioral Disorders (EBD).
- ► General perception that it is easier to screen for vision and hearing concerns as the family typically provides follow-up for glasses or hearing assistance.
- Political realities of managing parent reactions to behavior screenings and addressing issues of confidentiality.
- ► Lack of needed skill set. Educators often are not trained to respond to behavior with the same confidence that they are able to respond to academic concerns.

Within a tiered framework of support one important goal is to "catch" students before academic and/or behavioral challenges become severe. Universal screening provides an opportunity for all children to be considered for risk factors against identified criteria. It shifts focus from a traditional "wait to fail" service delivery model toward proactively seeking out children who may be at risk of academic failure and/or behavioral difficulties that would potentially benefit from specific instruction or intervention (Glover and Albers, 2007). This proactive approach minimizes impact of risk and/or may impede further development of more severe problems (Severson, Walker, Hope Doolite, Kratochwill, 2007).

The following pages provide sample questions and score reports from several different screening questionnaires.

"An effective comprehensive screening program requires a long-term investment of time, money, and personnel resources. Although the initial investment may be substantial, long-term benefits may include an overall decrease in costly special education referrals and grade retentions. Challenges of the 21st century require a systems approach to early intervention and prevention services informed by valid and reliable data collection. Universal screening programs are essential to ensuring that the children who need services earliest get just that." Henderson and Strain, 2009, p. 4

Sample items were selected from the instruments listed below:

- ► Social, Academic, and Emotional Behavior Risk Screener (SAEBRS; Kilgus, Chafouleas, Riley-Tilman, and Embse, 2013)
- ► The Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997)
- ► The Behavioral and Emotional Screening System (BASC-2 BESS; Kamphaus and Reynolds, 2007)
- ► The Systematic Screening for Behavior Disorders (SSBD; Walker and Severson, 1994)

#### SOCIAL, ACADEMIC, AND EMOTIONAL BEHAVIOR RISK SCREENER (SAEBRS)

Kilgus, Chafouleas, Riley-Tillman, and von der Embse, 2013 EBI.missouri.edu

#### VALIDATED PURPOSE OF ASSESSMENT METHOD

☑ Screening □ Diagnostic □ Progress Monitoring

**OVERVIEW:** The SAEBRS is a brief tool supported by research for use in universal screening for behavioral and emotional risk. The measure falls within a broad class of highly efficient tools, suitable for teacher use in evaluating and rating all students on common behavioral criteria (Severson, Walker, Hope--Doolittle, Kratochwill, and Gresham, 2007). The SAEBRS is designed for use in the K--12 setting. It is grounded within a conceptual model, which states that a student's success in school is not only related to his or her academic achievement, but also success within multiple behavioral domains. Research suggests the SAEBRS may be used to evaluate student functioning in terms of overall general behavior, as assessed by a broad Total Behavior (19 items). Research further suggests the SAEBRS may be used to evaluate student functional students, as assessed by the Social Behavior (6 items), Academic Behavior (6 items), and Emotional Behavior (7 items) subscales.

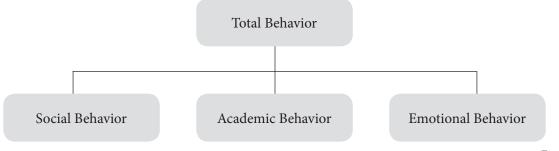


Figure 3.1

**REVIEW OF RELIABILITY AND VALIDITY EVIDENCE:** To date, three studies have yielded evidence regarding SAEBRS reliability, validity, and diagnostic accuracy, with research conducted across elementary, middle, and high school settings (Kilgus, Chafouleas, and Riley--Tillman, 2013; Kilgus, Eklund, von der Embse, and Taylor, 2014; Kilgus, Sims, von der Embse, and Riley--Tillman, 2014). Overall, initial findings yield support for the use of the SAEBRS in universal screening across the K--12 spectrum. Diagnostic accuracy results are particularly encouraging, with sensitivity and specificity values generally falling within optimal or acceptable ranges (i.e.,  $\geq$  .80--.90; Kilgus, Riley--Tillman, Chafouleas, Christ, and Welsh, 2014). Together, these findings suggest that the SAEBRS might be used to reliably differentiate between at risk and not at risk students, with risk defined through gold standard measures (e.g., *Social Skills Improvement System* [Gresham and Elliott, 2008]; *BASC-2 Behavioral and Emotional Screening System* [Kamphaus and Reynolds, 2007]).

**STRENGTH AND WEAKNESS:** Primary strengths of the SAEBRS include its usability and contextual appropriateness, two characteristics identified as crucial in universal screening (Glover and Albers, 2007).

**Usability:** the SAEBRS is comprised of a small number of items that may be completed in1-3 minutes for a single student. In addition, given psychometric support for both the SAEBRS broad scale and subscales, schools may choose to only complete those SAEBRS subscales that are relevant to their

concerns and decision making. For instance, a school could choose to only rate students on Social Behavior and Emotional Behavior, thus reducing the number of items that must be completed for each student.

**Contextual appropriateness:** SAEBRS items correspond to categories of behavior found within the literature to be highly relevant to social and academic success in the early childhood, school aged, and adolescent stages of development (DiPerna, 2006; Masten et al., 2005; Walker, Irvin, Noell, and Singer, 1992). These include categories of both (a) adaptive behaviors, including social skills, academic enablers, and emotional wellness factors, and (b) maladaptive behaviors, including externalizing behavior, internalizing behavior, and attentional problems. This balance between both adaptive and maladaptive is in accordance with recommendations from recent research, which has suggested that prosocial behavior and problem behavior each uniquely predict student behavioral outcomes, and are thus important in supporting early identification of behavioral and emotional risk (Kwon, Kim, and Sheridan, 2012).

A weakness of the SAEBRS pertains to its relative novelty, having only been examined through three studies to date. As such, replications of previous work, as well as new research (e.g., examination of diagnostic accuracy in high school), is necessary to yield full support for the SAEBRS within universal screening in school settings.

**ADMINISTRATION STEPS:** Teachers complete the SAEBRS once for each student in their classroom. Therefore, if 15 students are enrolled in a particular teacher's classroom, the teacher will fill out the SAEBRS 15 times. Once a teacher is ready to rate a student, he/she should complete the SAEBRS subscales deemed by the school to be pertinent to their decision making. To complete each SAEBRS item, the teacher indicates how frequently the student in question has displayed each behavior (as described within each item) **during the previous month**. The teacher is to ONLY consider the behavior exhibited by the student during the month prior to SAEBRS completion. No other behaviors outside of this time period should be taken into consideration during item completion.

It is common for teachers to request a definition of the behaviors represented within each SAEBRS item. For instance, many seek additional clarification regarding what should be considered a 'temper outburst.' However, as part of standard administration, SAEBRS users are not to be provided with such definitions. Rather, teachers are to use their best judgment in considering what actions are representative of each behavior.

**MATERIALS:** Only the SAEBRS form and writing utensil are required for its completion. No other additional materials or resources are necessary.

**DATA CODING/SORTING/PRESENTING PROCESS:** Once all ratings have been completed, the user adds the scores within each subscale to yield a summed score. Subscale scores can then be combined to yield the Total Behavior scale score. Summed scores range between 0-18 for *Social Behavior* and *Academic Behavior*, 0-21 for *Emotional Behavior*, and 0-57 for *Total Behavior*. Please see below for guidelines regarding how each item should be scored, as scoring varies from item to item:

	NEVER	SOMETIMES	OFTEN	ALMOST ALWAYS		
SOCIAL BEHAVIOR						
Arguing	3	2	1	0		
Cooperation with peers	0	1	2	3		
Temper outbursts	3	2	1	0		
Disruptive behavior	3	2	1	0		
Polite and socially appropriate	0	1	2	3		
Impulsiveness	3	2	1	0		
ACADEMIC BEHAVIOR						
Interest in academic topics	0	1	2	3		
Preparedness for instruction	0	1	2	3		
Production of acceptable work	0	1	2	3		
Difficulty working independently	3	2	1	0		
Distractedness	3	2	1	0		
Academic engagement	0	1	2	3		
EMOTIONAL BEHAVIOR						
Sadness	3	2	1	0		
Fearfulness	3	2	1	0		
Adaptable to change	0	1	2	3		
Positive attitude	0	1	2	3		
Worry	3	2	1	0		
Difficulty rebounding from setbacks	3	2	1	0		
Withdrawal	3	2	1	0		

**ANALYSIS GUIDELINES:** Within each SAEBRS scale and subscale, higher scores are indicative of better student behavior and more appropriate functioning. Although SAEBRS scores can often be used as continuous variables, it is sometimes convenient to classify scores as *at risk* and *not at risk*. Using the ranges shown below, subscale and scale scores can be dichotomized in terms of risk categories within the Social Behavior, Academic Behavior, Emotional Behavior, and Total Behavior domains.

	At Risk	Not At Risk
Social Behavior	0 - 12	13 - 18
Academic Behavior	0 - 9	10 - 18
Emotional Behavior	0 - 17	18 - 21
Total Behavior	0 - 36	37 - 57

How risk should be defined depends on the specific subscale(s) within which a student falls in the at risk range. Please see below for a description of each type of risk:

- ► **Risk for Social Behavior Problems** student displays behaviors that limit his/her ability to maintain age appropriate relationships with peers and adults.
- ► **Risk for Academic Behavior Problems** student displays behaviors that limit his/her ability to be prepared for, participate in, and benefit from academic instruction.
- ► **Risk for Emotional Behavior Problems** student displays actions that limit his/her ability to regulate internal states, adapt to change, and respond to stressful/challenging events.

#### Additional Resources/Suggestions for Training Materials:

- ► EBI.missouri.edu
  - The EBI Network has been developed to provide guidance in the selection and implementation of evidence-based interventions in the classroom setting. Participating Programs include East Carolina University School Psychology, Indiana University School Psychology, Mizzou School Psychology, and Mizzou Special Education.
- ► SAEBRS users are referred to works from Kilgus et al. (2014), Kilgus, Eklund, et al. (2014), and Kilgus, Sims, et al. (2014) for more information regarding SAEBRS development, as well as recommendations for how the SAEBRS might be integrated within school-based service delivery models.
- ► Users are also referred to various books on the topic of both universal screening (Kettler, Glover, Albers, and Feeney-Kettler, 2013) and multi-tiered systems of support (e.g., Riley-Tillman, Burns, and Gibbons, 2013) for information regarding how universal screening might be used to support student social and academic outcomes.

#### THE STRENGTHS AND DIFFICULTIES QUESTIONNAIRE

The Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997) is a brief behavioral screening questionnaire about 3-16 year olds. It exists in several versions to meet the needs of researchers and educators.

All versions of the SDQ ask about 25 attributes, some positive and others negative. These 25 items are divided between 5 scales:

- 1) emotional symptoms (5 items)
- 2) conduct problems (5 items)
- 3) hyperactivity/inattention (5 items)
- 4) peer relationship problems (5 items)
- 5) prosocial behavior (5 items)

1 to 4 added together to generate a total difficulties score (based on 20 items)

25 items are included in questionnaires for completion by the parents or teachers of 4-16 year olds (Goodman, 1997). A slightly modified informant-rated version is available for the parents or preschool teachers of 3 and 4 year olds. In addition, questionnaires for self-completion by adolescents also are available and ask about the same 25 traits, though the wording is slightly different (Goodman et al, 1998). This self-report version is suitable for young people in the 11-16 age range, depending on their level of understanding and literacy.

In general population samples, it is recommended to use a three-subscale division of the SDQ into internalizing problems, externalizing problems and the prosocial scale (Goodman et al, 2010).

The Strengths and Difficulties Questionnaire can be administered by hand and scored by hand or by entering scores online. Paper copies of the instrument can be downloaded and photocopies made with no charge.

# GENERAL POPULATION SCREENING

Internalizing = Emotional + Peer Relationship Problems (10 items) Externalizing = Conduct + Hyperactivity Symptoms (10 items) Strengths = Prosocial Scale (5 items)

Online administration and scoring for the SDQ also is available. After answers for each item are entered a summary of results is immediately provided. This report can be saved to a computer and/or printed.

#### **SDQ Information Sites:**

#### http://www.sdqinfo.org

This site provides information about the instrument. All versions (teacher, parent, student) are available for download from this site. Go here if you want to administer the SDQ by hand using paper copies and pencil.

#### http://www.sdqscore.org

This site can be accessed using a tab from the home page (sdqinfo.org) or by using the above address. This site allows you to enter data from paper versions of the Strengths and Difficulties Questionnaires (SDQs) and obtain an instant report. Use this site if you completed the SDQ by hand, but would like to use the online scoring and reporting tools.

#### http://www.youthinmind.org

This site is for parents, teachers and young people who want to complete the SDQ online and get immediate feedback. Reports generated from this site can be saved to a computer and printed.

#### SAMPLE ITEMS

#### Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997) -Parent /Teacher Version Ages 11-17

**INSTRUCTIONS.** For each item, please mark the box for Not True, Somewhat True or Certainly True. Answer all items as best you can even if you are not absolutely certain. Please give your answers on the basis of the child's behavior over the last six months or this school year.

	Not True	Somewhat True	Certainly True
Considerate of other people's feelings			
Often complains of headaches, stomach-aches or sickness			
Often loses temper			
Many worries or often seems worried			
Helpful if someone is hurt, upset or feeling ill			
Has at least one good friend			
Generally liked by other youth			
Nervous in new situations, easily loses confidence			
Kind to younger children			
Many fears, easily scared			

## THE BEHAVIORAL AND EMOTIONAL SCREENING SYSTEM (BASC-2 BESS; KAMPHAUS AND REYNOLDS, 2007)

The BASC-2 Behavioral and Emotional Screening System offers a reliable, quick, and systematic way to determine behavioral and emotional strengths and weaknesses of children and adolescents in preschool through high school. This screening system consists of brief forms that can be completed by teachers, parents, or students individually or in any combination.

Each form ranges from 25 to 30 items, requires no formal training for the raters, and is easy to complete, taking only 5-10 minutes of administration time. The screener assesses a wide array of behaviors that represent both problems and strengths, including internalizing problems, externalizing problems, school problems, and adaptive skills. It yields one Total Score and corresponding risk classification (Normal, Elevated, Extremely Elevated) that is a reliable and accurate predictor of a broad range of behavioral, emotional, and academic problems.

**Teacher form with two levels:** Preschool (for ages 3 through 5) and Child/Adolescent (for Grades K through 12).

**Student self-report form with one level:** Child/Adolescent (for Grades 3 through 12).

**Parent form with two levels:** Preschool (for ages 3 through 5) and Child/Adolescent (for Grades K through 12

**SCORING.** The BASC-2 Behavioral and Emotional Screening System may be computer-scored (hand-key entry or scan entry) using ASSIST<sup>™</sup> software or hand-scored. Scoring software provides both individual-and group-level reporting options.

**INDIVIDUAL REPORTS.** When reporting scores for a child or adolescent, up to three forms (e.g., teacher, parent, and student) can be selected for inclusion in an individual report. Included in the report are validity index scores, along with the Total Score raw score, T score, percentile, and classification levels.

**GROUP REPORTS.** The ASSIST software can be used to define multiple groups within a setting and generate summary reports for each level within a group. For example, a classroom level report lists the names and scores of all students in a roster. A district level report includes summary statistics for the entire district (e.g., 82% of students in the district fell into the Normal risk range, 10% of students fell into the Elevated range, and 8 % in the Extremely Elevated range), schools within the district, and individual classrooms. Reports also can be generated to provide summary data for up to three different administrations of the instrument.

Sample reports and product information are available from the following site: http://www.pearsonassessments.com

### SAMPLE ITEMS

#### Behavioral and Emotional Screening System (BASC-2 BESS; Kamphaus and Reynolds, 2007) – Teacher Form Child/Adolescent, Grades K-12

**INSTRUCTIONS.** Listed below are phrases that describe how students may act. Read each phrase, and mark the response that describes how this student has behaved recently (i.e., in the last several months)

If you don't know or are unsure of your response to an item, give your best estimate. A "Never" response does not mean that the student never engages in a behavior, only that you have not observed the student to behave that way.

	Never	Sometimes	Often	Almost Always
Pays attention.				
Is sad.				
Is well organized.				
Is easily upset.				
Is good at getting people to work together.				
Gets into trouble.				
Annoys others on purpose.				
Has headaches.				
Is fearful.				
Is negative about things.				

Figure 3.3

#### SYSTEMATIC SCREENING FOR BEHAVIOR DISORDERS

The SSBD incorporates three gates, or stages. The screening takes into consideration both teacher judgments and direct observations in order to identify students at-risk for developing ongoing internalizing and externalizing behavior concerns. Stage 1 of the SSBD involves teacher nomination. Stage 2 requires that teachers complete a Critical Events Inventory and a short adaptive and maladaptive behavior checklist for each of the nominated students. Students whose scores on these checklists exceed the established cut off are then candidates for Stage 3. This final stage involves a 15-minute interval observation in both the classroom and on the playground to determine a student's actual performance in social and classroom interactions.

#### SAMPLE ITEMS

#### Systematic Screening for Behavior Disorders (SSBD; Walker and Severson, 1994), Grades K-6

#### STAGE ONE: RANK ORDER STUDENTS ON INTERNALIZING DIMENSIONS

- 1. Review the definition of internalizing behavior and the list of all students in your class.
- 2. In Column One enter the names of the 10 students whose characteristic behavior patterns most closely match the internalizing behavioral definition.
- 3. In Column Two, rank order the students listed in Column One according to the degree or extent to which each exhibits internalizing behavior. The student who exhibits internalizing behavior to the greatest degree is ranked first and so on until all ten students are rank ordered (Walker and Severson, 1994).

#### **Examples Include:**

- Having low activity levels
- Not talking with other children
- Shy, timid, and/or unassertive
- Preferring to play or spend time alone
- Fearful
- Unresponsive to social initiations

#### **Non-Examples Include:**

- Initiating social interactions
- Playing with others
- Joining in with others
- Having conversations
- Resolving conflicts appropriately
- Displaying positive social behavior

Column One – List Internalizers	Column Two – Rank Order Internalizers
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

Figure 3.4

## SAMPLE ITEMS

#### Systematic Screening for Behavior Disorders (SSBD; Walker and Severson, 1994), Grades K-6

#### STAGE ONE: RANK ORDER STUDENTS ON EXTERNALIZING DIMENSIONS

- 1. Review the definition of externalizing behavior and the list of all students in your class.
- 2. In Column One enter the names of the 10 students whose characteristic behavior patterns most closely match the externalizing behavioral definition.
- 3. In Column Two, rank order the students listed in Column One according to the degree or extent to which each exhibits externalizing behavior. The student who exhibits externalizing behavior to the greatest degree is ranked first and so on until all ten students are rank ordered (Walker and Severson, 1994).

#### **Examples Include:**

• Arguing

• Stealing

Defying the teacher Having tantrums

• Disturbing others

• Not following rules

#### **Non-Examples Include:**

- Cooperating, sharing
- Working on assigned tasks
- Listening to the teacher
- Following directions
- Attending to task
- Complying with requests

Column One – List Externalizers	Column Two – Rank Order Externalizers
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

Figure 3.5

The following pages provide a summary of characteristics for several research-based screening instruments (e.g., estimated time for administration of the screening, cost, and ordering information). In addition, regulations associated with parental consent for screening also are included. Finally, a series of key questions that should be considered prior to completing a universal screening are offered.

**NOTE:** The MO SW-PBS Initiative has copies of each instrument reviewed in the next section. These instruments are available for teams to view before making decisions to purchase. In addition, several schools in different regions of Missouri have incorporated use of screening instruments as part of their student identification process. If your team would like more information please contact your MO SW-PBS Consultant. MO SW-PBS does not endorse any individual instrument; rather these are made available as a resource.

## Social, Emotional and Behavioral Screening Instruments

		tge ennaren ana		
Instrument	Description	Method(s)	Administration	Cost
Strengths and	Grades K-12	Teacher or Parent	45 min-1hr/class	No cost if
Difficulties		Report		administered and
Questionnaire	Assesses conduct	(ages 4-10)	25 items	scored online.
(SDQ)	problems,			
	hyperactivity,	Teacher or Parent	Online administration	1 page per
youthinmind.com	emotional symptoms,	Report	and scoring available	student if
www.sdq.org	peer problems, and	(ages 11-17)		administered and
youthinmind.info	pro-social behavior	0.1.010	Manual scoring =	scored by hand.
sdqinfo.com		Student Self-Report	10 min/student	
	Total Difficulties	(ages 11-17)		
	Score reported as Low,			
	Medium or High Risk			
Behavioral and	Grades PreK-12	Teacher or Parent	5-10 min admin	Manual = \$62
Emotional Screening		Report		- 1 6
System	Assesses internalizing	(ages 3-5)	25-30 items	Teacher forms =
(BASC-2 BESS)	problems,	Teacher or Parent	Commenter	(\$100 for pkg of
	externalizing problems, school		Computer scoring	100)
Pearson	problems, and	Report (K-12)	available using ASSIST Software	Data
WWW.	adaptive skills.	(K-12)	Soltwale	Management
pearsonassessments.		Student Self-Report		System = \$589
com	Scores reported as	(Grades 3-12)		
com	Normal, Elevated or	(Grudes 5 12)		
	Extremely Elevated			
Systematic Screening	Grades K-6	Rank order students	45 min-1hr/class	Manual w/ video
for Behavior Disorders		according to behavior.	(stages 1 and 2)	
(SSBD)	Uses 3-stage, multi-		(****8*** * ***************************	(\$195)
	gate process to screen	Top ranked students	Scoring =	
	and identify students	are individually rated.	15-30 min/class	
Sopris West	who may be at risk of	· · · · · · · · · · · · · · · · · · ·		
http://store.	developing behavioral			
cambiumlearning.com	disorders.			

## School Age Children and Youth

Instrument	Description	Method(s)	Administration	Cost
Social Skills Improvement System (SSIS) Pearson www. pearsonassessments. com	Ages 3-19 Performance Screening Guide Measure of pro-social behaviors, math skills, reading skills, and motivation to learn for all students in an entire classroom.	Performance Screening Guide Teacher compares student performance as measured against grade level expectations.	Approximately 30 min per class	Performance Screening Guide (\$41.25 pkg10)
	Class-wide Intervention Program Provides social skill instructional scripts and resources for teaching 10 skill units.	Class-wide Intervention Program 10 units divided into 3 lessons per week. Each lesson includes 6 phases = Tell, Show, Do, Practice, Monitor Progress, and Generalization.	25-30 min per lesson	Teacher's Guide (\$77.25) Student Booklets (\$290 pkg 25)
	Individual Student Rating Scales Assessment of an individual's social skills, problem behaviors and academic competence. Intervention Guide Offers in-depth intervention for 20	Individual Rating Scales Teacher, Parent and Student self-rating options. Compares student performance to national norms. Intervention Guide Delivered in a	15-20 min/student Two 45 minute sessions per week for 15 weeks	Manual = \$101 Rating Forms (\$42 pkg 25) Scoring Software (\$249) Teaching Guide = (\$112)
	social skills linked to Individual Student Rating Scales Results.	small group setting. Designed for students with acquisition deficits.		

## School Age Children and Youth (cont.)

## Social, Emotional and Behavioral Screening Instruments

Instrument	Description	Method(s)	Administration	Cost
Devereux Early	2-5 years	Parent/	5-10 min/ student	Starter Kit = \$200
Childhood		Caregiver		
Assessment Program	A Total Protective		62 items	
(DECA)	Factors (TPF)	Teacher		
	composite score is		Likert	
	generated. Scales			
Kaplan Early Learning	assess			
Company	Initiative,			
www.kaplanco.com	Self-control, and			
	Attachment.			
	A 10-item Behavioral			
	Concerns scale			
	assesses behavioral			
	problems.			
Preschool and	3-6 years	Parent/	8-12 min/student	Starter Kit = \$120
Kindergarten		Caregiver		
Behavior Scales –	Measures social	m 1	76 items	No Data
Second Edition	skills and problem	Teacher	T *1 (	Management
(PKBS-2)	behaviors.		Likert	System
Pro-ed				
www.proedinc.com				
www.procenie.com				
Temperament and	11-71 months (1-6	Parent/	15-item	Introductory Kit
Atypical Behavior	years)	Caregiver	Screener	includes Manual,
Scale		Curegree	5 min/student	Screeners and
(TABS)	Brief screener	Teacher		Assessment Tools
	identifies potential		55 item checklist	= \$95
	problems.		15 min/student	
Brookes Publishing	<b>^</b>			
www.	A separate assessment			
brookespublishing.	tool, comprised of a			
com	detailed checklist, is			
	used when screening			
	score indicates a			
	concern			

## Preschool Age Children

Instrument	Description	Method(s)	Administration	Cost
Ages and Stages Questionnaire: Third	1 -66 months	Parent/ Caregiver	15-20 min/child	Starter Kit = \$250
Edition (ASQ-3)	Examines strengths and challenges in Self-Regulation,		30 items 2-3 min to score	Reproducible Data management
Brookes Publishing www. brookespublishing. com	Compliance, Communication, Adaptive Functioning, Autonomy, Affect, and Interpersonal Interactions.			system available
Early Screening Project (ESP)	3-5 years Process that allows for early intervention	Teacher rating followed by direct observation completed by someone other	Stage 1 and 2 can be completed in approximately 1 hour.	
Sopris West http://store. cambiumlearning.com	and identification of preschool adjustment problems.	than the classroom teacher	Stage 3 requires two 10-minute observations in unstructured settings.	
	Screens for Emotional Problems, Speech and Language Difficulties, Impaired Cognitive Ability, Attention Deficits, and Hyperactivity.			
	Scores reported as At Risk, High Risk, or Extreme Risk			
Social, Academic, and Emotional Behavior Risk Screener (SAEBRS)	K-12 Brief screener identifies areas where	Teacher rating	1-3 minutes/student 19 items	Minimal cost for web based scoring through fastbridge.org;
www.fastbridge.org	students are at risk or high risk.		Can choose to only complete subscales relevant to concerns	form may be accessed at no cost through ebi.missouri.edu and scored by hand.

## Preschool Age Children (cont.)

## **Requirements for Universal Screening**

When student(s) are observed, interviewed or tested, school staff must consider whether parental informed consent for these procedures is required. IDEA 2004 permits "screening" procedures, such as determining phonemic awareness proficiency and other progress monitoring activities necessary to inform instructional programming, without parental permission. Many schools are beginning to use academic and behavioral RtI. Assessment plans are not necessary for all RtI activities.

General Principles:

- ► If educators are *collecting new data* for the purpose of determining disability, an assessment plan is necessary.
- ► If educators are *reviewing existing data*, such as how a student is responding to behavior supports or academic instruction for the purpose of assisting the teacher in instruction components or instructional methods, no assessment plan is required.

## The Federal Register/Vol. 71, No. 156/Monday, August 14, 2006/Rules and Regulations: Parent Consent is not required:

- ► Before administering a test or other evaluation to all children 300.300(d)(1)(ii)
- ► Before reviewing existing data 300.300(d)(1)(i)
- ► When screening for instructional purposes 300.302

#### Specific wording:

Regulations: Part 300 / D / 300.300 / d / 1

- (1) Parental consent is not required before-
- (i) Reviewing existing data as part of an evaluation or a reevaluation; or
- (ii) Administering a test or other evaluation that is administered to all children unless, before administration of that test or evaluation, consent is required of parents of all children.

Regulations: Part 300 / D / 300.302

Sec. 300.302 Screening for instructional purposes is not evaluation.

The screening of a student by a teacher or specialist to determine appropriate instructional strategies for curriculum implementation shall not be considered to be an evaluation for eligibility for special education and related services. (Authority: 20 U.S.C. 1414(a)(1)(E))

#### EXAMPLE

## Parent Notification Letter for Universal Screening

Date:

TO: All Parents and Guardians

FROM:

RE: Response to Intervention and Screening Tools for Behavior

[School District] has begun the process of creating systems of academic and social-emotional support linked directly to the assessed needs of our students. This system, known as Response to Intervention or RtI, provides all students with timely and targeted interventions based upon the results of universal screening tools in reading, math and behavior.

Universal screening helps school staff to determine which students may be academically or behaviorally "at risk." These screenings can include recent results of state or district tests as well as specific academic or behavior screening tests; these screening assessments are typically administered to all students two or three times per year. Students whose scores fall below a certain cut-off are identified as possibly needing more specialized academic or behavior interventions. The use of universal screenings refines and strengthens our efforts to help all of our students be successful by allowing us to take positive and preventative measures as early as possible.

The universal screening tools in math and reading are very similar to tools we use every day to help us determine where students might have gaps in knowledge and need assistance. The behavior screening tool, [insert name of screener], focuses on academic engagement behaviors of students.

The [insert name of screener] is completed by teachers and is available at your school for your review. The results of the tool will be used to provide identified students with mentoring, social skill building and other supports to help them engage positively in learning. As with our academic universal screenings, you will be notified if your student is selected for participation in an intervention program. After reviewing the [insert name of screener], please contact your child's principal if you have questions about your child's participation.

Thank you for your willingness to assist [School District] in building a system of student supports that is linked directly to data. This will ensure that each of our students has the opportunity to receive the assistance they need to achieve academic and social-emotional success. Please do not hesitate to contact me if you have questions.

# Universal Screening Considerations (Adapted from Muscott, 2008)

Documented Purpose and Policy				
Minimum Feature	Questions to Consider	Team Notes/ Tasks to Complete		
1. The person who can authorize social-emotional / behavioral screening is identified and approval is obtained to design and implement the process.	<ul> <li>a. Who provides approval?</li> <li>Is it the school board, school superintendent, special services director, a leadership team and/or building level principal?</li> </ul>			
2. A clear purpose and intended outcome of screening is documented and aligns with district and building level mission, priorities and improvement goals.	<ul> <li>a. Is the alignment with district and building level mission, priorities and improvement goals documented?</li> <li>b. Is there an existing system for identifying atrisk students?</li> <li>c. Is the existing system effective in finding students with externalizing or internalizing types of concerns?</li> <li>d. Are there any groups of students who are not consistently identified?</li> <li>e. How will the results be used?</li> <li>f. How will screening be distinguished from a diagnostic process?</li> </ul>			
3. The policy and procedures for screening in non-behavior areas is used to inform development of screening system for social- emotional / behavioral concerns.	<ul> <li>a. What are the current policies and procedures regarding vision, hearing and academic screening?</li> <li>b. Is that policy effective and can it be used for social- emotional / behavioral concerns?</li> </ul>			
4. The policy and procedures for social-emotional / behavioral screening include decision rules for parent notification, parent consent and use of the results.	<ul> <li>a. How will awareness of the process and its benefits be developed among stakeholders?</li> <li>b. How will parents be notified of the screening?</li> <li>c. When in the process will parental consent be obtained? Will parental consent be active or passive?</li> <li>d. How will results of the screening be shared with parents? Will all parents be notified of results or will only parents of students identified be informed?</li> <li>e. How will results of the screening be used?</li> </ul>			
5. The policy and procedures for social-emotional / behavioral screening comply with district child find procedures.	a. Have the policy and procedures been reviewed and approved by the appropriate district-level personnel?			
6. A point of contact at the district and building level who will take responsibility for oversight of the screening process is identified.	a. Whose role is most aligned to complete this work?			

Clearly Defined Procedures			
Minimum Feature	Questions to Consider	Team Notes/ Tasks to Complete	
7. Timeline for administration(s) is determined and is frequent enough to catch transient students –first administration in Fall.	<ul><li>a. How often and when will screenings occur?</li><li>b. Is there a process in place to address concerns if a child demonstrates risk in between occurrences of screening?</li></ul>		
8. The screening process includes provision that all students are considered and the process is suitable to identify students with internalizing or externalizing concerns.	a. Which teachers will complete the screening so that all students have an equal chance of being considered?		
9. An evidence based instrument with appropriate psychometric properties and norms is identified.	a. What are the advantages and disadvantages of the instruments under consideration?		
10. Clear instructions to complete w/ training for all on how to complete.	a. Who will provide training and instructions for the screening process including how to complete the instrument, use of results and follow up obligations of participating teachers?		

Availability of Supports			
Minimum Feature	Questions to Consider	Team Notes/ Tasks to Complete	
11. Resources are available to support universal screening (e.g. personnel, materials and time for professional learning).	<ul><li>a. What materials will be required to complete the process?</li><li>b. How will materials be obtained?</li><li>c. How much time will be needed for screening and when will time be given for this to occur?</li></ul>		
12. A team exists that can support the student, family, and classroom teacher in determining what response should be taken for students who are identified as at-risk.	<ul><li>a. What is the responsibility of the team?</li><li>b. How are screening results processed once they reach the team?</li></ul>		
13. School and community- based supports for responding to identified students are available and adequate to serve the level of need.	<ul><li>a. What supports are available for students who are identified?</li><li>b. How do students, families and teachers access these supports?</li></ul>		

Once you have your criteria in place for Existing School Data, Nomination, and/or Universal Screening, it will be helpful to have details mapped out on a brief Student Identification Plan. This document would be good to include in your Tier 2 Staff Handbook and also for reference during Tier 2 Team meetings. After you have reviewed the Example Student Identification Plan, you can develop yours on the blank template that follows.

## EXAMPLE

## **Student Identification Plan**

Method and Timeline	Purpose and Process	Persons Responsible	Use of Results
Universal Screening of all incoming kindergarten age students • Annually - during kindergarten enrollment process	Parents will complete the Strengths and Difficulties Questionnaire	<ul> <li>School counselor with administrator will score and summarize results.</li> <li>Data will be presented to classroom teachers.</li> </ul>	<ul> <li>Students with high-risk levels will participate in a small group intervention beginning the first week of school.</li> <li>Students with at-risk indicators will be matched with a Check &amp; Connect mentor</li> </ul>
<ul> <li>Universal Screening of all students in the school.</li> <li>Bi-annually - Early October and Late January</li> </ul>	<ul> <li>During a designated staff meeting teachers are provided with a list of internalizing and externalizing risk characteristics.</li> <li>Homeroom teachers review a list of all students assigned to their class.</li> <li>Students list, in rank order, students they are concerned about.</li> <li>Additional information may be gathered for each student identified.</li> </ul>	<ul> <li>Classroom teachers complete the screening process.</li> <li>The Tier 2 Team reviews results and determines which students should be considered for interventions.</li> </ul>	<ul> <li>Students with high- risk indicators may be considered for FBA-BIP.</li> <li>Students in the at-risk range may be nominated to participate in a small group intervention.</li> </ul>
Review of Existing School Data • Monthly	<ul> <li>ODR data <ul> <li>3rd discipline referral (ODR)</li> </ul> </li> <li>Attendance and Tardy <ul> <li>3rd absence or tardy</li> </ul> </li> <li>Visits to Counselor <ul> <li>3rd visit to school counselor</li> </ul> </li> <li>Visits to Health Center <ul> <li>3rd visit to school nurse (without known medical condition)</li> </ul> </li> <li>Course Failures <ul> <li>1 or more course failures</li> </ul> </li> <li>Names of students who meet criteria for risk on any indicator will be submitted to the Tier 2 Team on the last day of each month.</li> </ul>	<ul> <li>SW-PBS Tier 1 Team</li> <li>School Secretary</li> <li>School Counselor</li> <li>School Nurse</li> <li>Administrator</li> </ul>	<ul> <li>The Tier 2 Team will review the list of names submitted to determine if any students that met one or more risk criteria need to be considered for additional support.</li> </ul>
Teacher Nomination On-Going Availability	<ul> <li>At any time during the school year school staff, parents, and/or students may request assistance or nominate a student for additional social, academic, and/or behavioral support.</li> </ul>	<ul> <li>Individual making the nomination submits a completed form to the school administrator.</li> <li>Administrator works with the Tier 2 Team to prioritize review of nominations.</li> </ul>	<ul> <li>One or more of the following may be recommended by the Tier 2 Team:         <ul> <li>Gather additional information</li> <li>Provide small group intervention</li> <li>Nominate for FBA-BIP process</li> </ul> </li> </ul>

## **Student Identification Plan**

Method and Timeline	Purpose and Process	Persons Responsible	Use of Results

## **Next Steps**

Below are some next steps to consider as you develop Tier 2. Some of the steps involve active staff input. Be sure to build your action plan with that in mind.

#### See Tier 2 Team Action Plan – Student Identification Process



- 1. Develop a systematic process to identify students at-risk for social, emotional, and/or behavioral challenges.
  - A. Develop a Teacher Nomination form that is simple and brief to complete.See the Example: *Teacher Nomination for Assistance*
  - B. List academic and behavioral data that is currently collected in your school or district. Determine proficient, at-risk, and high-risk criteria for each measure. Indicate specific criteria that "trigger" referral to the Tier 2 Team.
    - Use the Blank Existing School Data Inventory
  - C. Develop and implement a process to administer regular, periodic screening for social, emotional and/or behavioral risk.
    - Use the Blank Student Identification Plan



D. Use existing communication strategies to inform full staff about procedures for identifying students who need additional supports.