

Review Screening Tools

Attached is an introduction to a Resource Aid Packet entitled:

Screening/Assessing Students: Indicators and Tools

Go to the Center website –
<http://smhp.psych.ucla.edu> to review the material
and download any of the resources you see as
potentially useful.

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Excerpt From

*From the Center's Clearinghouse ...**

A Resource Aid Packet on

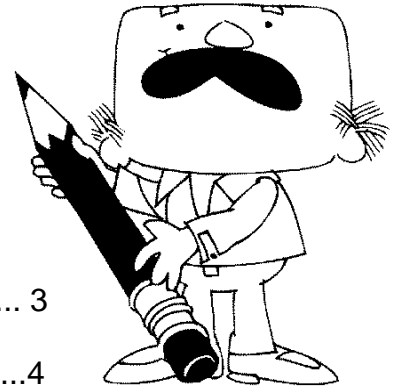
**Screening/Assessing Students:
Indicators and Tools**

This document is a hardcopy version of a resource that can be downloaded at no cost from the center's website (<http://smhp.psych.ucla.edu>).

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I. Screening

A. Screening: A Note of Caution

Formal screening to identify students who have problems or who are "at risk" is accomplished through individual or group procedures. Most such procedures are *first-level* screens and are expected to *over identify* problems. That is, they identify many students who do not really have significant problems (false positive errors). This certainly is the case for screens used with infants and primary grade children, but false positives are not uncommon when adolescents are screened. Errors are supposed to be detected by follow-up assessments.

Because of the frequency of false positive errors, serious concerns arise when screening data are used to diagnose students and prescribe remediation and special treatment. Screening data primarily are meant to sensitize responsible professionals. No one wants to ignore indicators of significant problems. At the same time, there is a need to guard against tendencies to see *normal variations* in student's development and behavior as problems.

Screens do not allow for definitive statements about a student's problems and need. At best, most screening procedures provide a preliminary indication that something may be wrong. In considering formal diagnosis and prescriptions for how to correct the problem, one needs data from assessment procedures that have greater validity.

It is essential to remember that many factors found to be symptoms of problems also are common characteristics of young people, especially in adolescence. This means *extreme caution* must be exercised to avoid misidentifying and inappropriately stigmatizing a youngster. *Never* overestimate the significance of a few indicators.

I. Screening

B. The Debate about Screening – the pros and the cons

Should schools use behavioral screening to find 'at risk' children?

Excerpted from Insight on the News. Oct. 4, 1999.

By James M. Kauffman.

http://www.findarticles.com/cf_0/m1571/37_15/56182669/print.jhtml

“...Most teachers know which students probably are headed for trouble...

Teachers do better in identifying high-risk youngsters of any age when they have a systematic way of describing kids' behavior and know just what to look for. The most accurate and reliable behavioral screening methods rely on teacher judgments guided by rating and observation instruments that have been field-tested...

Every screening device produces some errors: false positives and false negatives. A false positive means the screening identifies someone it shouldn't have; a false negative means someone who should have been identified was overlooked...

We don't want to identify more students for special services; we already serve too many. If you want to prevent problems, then you have to identify more kids – address problems earlier, which inevitably means identifying more students than we do now, when we wait for the problems to get out of hand...”

Kauffman, a former elementary-school teacher, is Charles S. Robb Professor of Education at the University of Virginia and coeditor of the journal, Behavioral Disorders.