



Presentation

FULL DETAILS AND TRANSCRIPT

Universal Screening for All Students

December 2009

Topic: Response to Intervention in Primary Grade Reading
Practice: Universal Screening

Highlights

- Response to Intervention (RtI) as an early detection and prevention approach
- Rationale for universal screening with teacher judgment reserved for progress monitoring
- Scheduling reading screenings at beginning and middle of year for K-2 students
- Convening of a building-level RtI team to manage screening process
- Selection of screening measures based on appropriate content, accuracy of prediction, and cost
- Reading skills to focus on at each grade level
- Predictive validity based on specificity and sensitivity
- Establishing grade-level benchmarks for making decisions about level of risk for failure
- Establishing and refining cut-points

Full Transcript

Slide 1: Welcome

Welcome to the overview on Universal Screening for All Students.

Slide 2: Early prevention

Beginning readers who are struggling need help right away but they often don't receive it until grade 2 or 3—after they have been officially diagnosed with a learning disability or have fallen far behind their peers.

Response to Intervention, or “RtI,” is a multi-tier instructional program that offers a strategy for early detection and prevention of reading difficulties. Key components of RtI are the screening of all students and ongoing monitoring of their progress in core reading skills.

Slide 3: Universal screening

When a school only assesses those students who are already demonstrating problems with reading, other students who are at risk for future reading difficulties can be overlooked. This is why universal screening is such a critical first step in determining the scope of reading support a school needs to offer.

Universal screening provides an objective “reading” on students’ skills. This does not mean that teacher observation and judgment is unimportant. By monitoring student progress over time, teachers will make an important contribution in gauging a student’s progress in both core and intervention programs.

Slide 4: Administer twice per year

Screenings for reading difficulty should take place twice a year—at the beginning of the school year and again in the middle of the year. These midyear screenings are especially important for younger students, as the results are likely to give a more accurate picture of students’ skills than those obtained at the beginning of the year.

Slide 5: Create a building-level team

A universal screening program requires schoolwide coordination of staff and resources. A building-level RtI team should be comprised of diverse members with a range of expertise, such as teachers, special educators, school psychologists, reading coaches, and the principal.

The team will be responsible for a number of tasks, from managing basic logistics, such as determining

who will administer the assessments and handling scheduling, to more substantive responsibilities, such as selecting screening measures and establishing benchmarks to identify at-risk students.

Slide 6: Select screening measures

When considering which measures to adopt, the building-level team should give special attention to each measure's efficiency, reliability, and proven validity.

Specific factors to consider include:

- ensuring that the appropriate reading skills are being measured,
- how accurately the measure predicts risk, and
- cost.

Slide 7: Appropriate reading skills

Screening measures should focus on appropriate reading skills for each grade level.

- In kindergarten, screening should assess letter knowledge, phonemic awareness, and expressive and receptive vocabulary.
- In grade 1, focus should shift to phonemic awareness, decoding, word identification, and text reading.
- In grade 2, screening should focus on word reading and passage reading.

It may be necessary to use more than one screening measure in order to assess all of these skills.

Slide 8: Accuracy

The accuracy of any given screening measure in predicting future reading ability is referred to as its predictive validity.

Predictive validity has two aspects:

its *sensitivity*—the degree of accuracy with which it correctly identifies students at risk for reading difficulties; and

its *specificity*—its accuracy in identifying students at low risk for such difficulties.

Slide 9: False positives

Use of at least two screening measures is highly recommended, as use of a single measure can often result

in false positives, such as identifying students as needing additional assistance, but who are likely to do fine without it.

Using two screening measures can both enhance the accuracy of the screening process and ensure that schools are not taxing their resources by providing intervention to an inflated percentage of the student population.

Slide 10: Costs

When selecting which screening mechanisms to implement, it's important to factor in the various costs involved. Each additional measure requires more staff time to administer and may displace instruction. Moreover, interpreting multiple indices or measurement results can be a complex and time-consuming task.

These factors should be carefully considered when selecting the number and type of screening measures to adopt. The team needs to be sure that their school has the capacity to meet the demands of the screening process, and to consider alternatives such as training paraprofessionals to conduct screening rather than taking teachers away from classroom instruction.

Slide 11: Establish benchmarks

Interpretation of screening results requires grade-level benchmarks, or growth rates, to determine which children are at low, moderate, or high risk for developing reading difficulties. Grade-level benchmarks indicate when a particular reading skill should be achieved.

The federal Office of Special Education Programs offers a good starting point for information on benchmarks screening and progress monitoring through its National Center on Response to Intervention website.

Slide 12: Set cut-points

Once benchmarks have been established, the district will need to establish cut-points, or cutoff scores, to identify those students who are likely to reach proficiency without additional assistance.

It is critical to keep in mind that no measure is perfectly reliable. When students' scores fall slightly below or above a cutoff score on a benchmark test, schools may wish to conduct an additional assessment of those students or monitor their progress for a period of six to eight weeks to determine whether the student does, in fact, require additional assistance.

Slide 13: Refine cut-points for accuracy

Schools may need to refine initial benchmark cut-points to obtain the right level of accuracy for identifying at-risk students. A lenient cut point can result in false positives that end up being more costly to the school, while a more stringent cut point may miss students at risk for potential reading problems.

In general, it's best to set screening cut-points that will identify a pool of children, and then follow up with regular progress monitoring to further determine those most at risk.

Slide 14: Screening is just the start

Remember: screening is just the start. Progress monitoring ensures that students continue to receive interventions at a level of intensity matched to their developing needs.

Slide 15: Learn more

To learn more about Universal Screening for All Students, please explore the additional resources on the Doing What Works website.