



## School Mental Health Communities of Practice

### *Screening for Mental Health/Behavioral Health Concerns in K-12 Students*

School-wide universal screening for MH/BH issues is a practice that has become more prevalent and is now recommended by the National Association of School Psychologists (NASP, 2009), as well as the National Research Council and the Institute of Medicine, who built upon criteria established by the World Health Organization (O'Connell, Boat, & Warner, 2009). Universal screening for MH/BH issues can help with early identification of students who are at-risk or in need of intervention(s) related to these concerns, as research suggests that significantly more students require MH/BH services than currently receive them (NASP, 2009). Universal screening for these concerns, particularly when implemented within a multi-tiered model of behavioral support, such as Positive Behavioral Interventions and Supports (PBIS), may help these students receive earlier services than they otherwise would, may prevent the need for more intensive special education services, or may assist with more stable behavior patterns in the future. However, some research suggests that less than 5% of schools engage in MH/BH screening, and those that do may not adequately use screening data to inform interventions (Vannest, 2012).

The following 6-step MH/BH screening best practice process can assist you in identifying K-12 students in need of additional MH/BH services and supports.

#### **1. Establish a school leadership team**

If a school team whose purpose is to address student behavior or school climate issues does not already exist, establishing or repurposing a building leadership team is the first step in the process of implementing school-wide screening for MH/BH issues. It is recommended that this team consist of leaders who will help plan, implement, and evaluate the screening process through collaboration and feedback with other school professionals. This representative team should meet regularly to ensure that screening efforts are planned for, implemented, and monitored effectively. Different schools may have different names for this team and may already have a team of this nature in place that can subsume screening under its purview. If an already-established team (e.g., Ohio Improvement Process [OIP] team, behavior team, or PBIS team) adds this process to its agenda, it is important that all members are aware of the importance of implementing this school-wide screening before moving forward.

Members of this team may include building administrator(s), individual(s) with expertise in assessment and mental health (such as school psychologist, school social worker, or school counselor), regular education and special education teacher(s) representing all



grade levels and students subgroups (such as English language learners, early childhood), non-administrative staff in a leadership position (such as parent liaisons, literacy coaches), representative(s) of the teachers' union, stakeholder(s) from the community (such as business leaders, parents), and non-certified staff (such as secretaries, custodial staff).

Additional considerations for this team can be found on pages 5-7 of the *School-Wide Universal Screening for Behavioral and Mental Health Issues: Implementation Guidance*: ([http://resources.oberlinkconsulting.com/uploads/compendiums/Screening\\_Guidance\\_Document.pdf](http://resources.oberlinkconsulting.com/uploads/compendiums/Screening_Guidance_Document.pdf)).

## **2. Identify key areas to screen and select appropriate screening instrument(s)**

Once the school leadership team has been established, the next important task is to determine the area(s) of greatest need in the school and select the appropriate screening instrument(s) for this specific need. In order to determine the area(s) in need of screening, multiple methods can be used, including stakeholder interviews, focus groups, and/or reviews of existing data sources. Existing data sources may be internal (such as office disciplinary referrals, intervention assistance team data, bullying reports, nurse reports, seclusion/restraint) or external (such as county-level mental health survey data, family and children first council data), depending on school/district protocols and the available data for your situation. This initial data can be used to determine the area(s) of greatest need, and the subsequent screening data can be used to clarify this need and eventually create a plan for intervention.

Once the area(s) of greatest need have been determined and agreed upon by the school-based team, appropriate screening instrument(s) must be selected. The first step of this process is to create a list of potential screeners that examine the constructs related to this need (Glover & Albers, 2007). The *Mental Health, Social-Emotional, and Behavioral Screening and Evaluation Compendium* (1st and 2nd Editions) could be consulted in creating this list of possible screeners (see links at the end of this brief). Once an initial list has been drafted, there are multiple considerations in narrowing down this list to useful and valid measures.

For a thorough review of considerations in evaluating universal screening assessments, please review the general summary from pages 8-10 of the *School-Wide Universal Screening for Behavioral and Mental Health Issues: Implementation Guidance*: ([http://resources.oberlinkconsulting.com/uploads/compendiums/Screening\\_Guidance\\_Document.pdf](http://resources.oberlinkconsulting.com/uploads/compendiums/Screening_Guidance_Document.pdf)).



### **3. Plan for implementation**

Before implementing any form of systematic screening, it is important to review any relevant federal, state, local, and district guidelines that may help determine the legality, ethics, and typical policy of conducting universal screenings in your area. Of specific importance are any district policies, the Individuals with Disabilities Education Improvement Act, and the Protection of Pupil Rights Amendment of 1978 (PPRA) (Lane et al., 2012). In general, individuals involved with the screening process and its implementation should be included in the planning stage, perhaps including the building leadership team, families, education and mental health professionals, primary care providers, representatives of community agencies, and any other relevant individuals (Weist et al., 2007). The plan should include who will complete the screening tool (e.g. student, parent, or teacher) in addition to when and where the screening will occur and consideration of issues related to consent, confidentiality, and social validity.

Additional considerations regarding your plan for implementation can be found on pages 11-13 of the *School-Wide Universal Screening for Behavioral and Mental Health Issues: Implementation Guidance*:  
([http://resources.oberlinkconsulting.com/uploads/compendiums/Screening\\_Guidance\\_Document.pdf](http://resources.oberlinkconsulting.com/uploads/compendiums/Screening_Guidance_Document.pdf)).

### **4. Administer screening**

Once the planning stage has been thoroughly completed and staff members are aware of the plan and importance of universal screening, actual administration of the screening should be a fairly straightforward step by following the plan for implementation.

Additional considerations regarding scripts, logistics, fidelity, and unintended negative consequence related to the administration of the screening tool can be found on page 14 of the *School-Wide Universal Screening for Behavioral and Mental Health Issues: Implementation Guidance*:  
([http://resources.oberlinkconsulting.com/uploads/compendiums/Screening\\_Guidance\\_Document.pdf](http://resources.oberlinkconsulting.com/uploads/compendiums/Screening_Guidance_Document.pdf)).

### **5. Use results to drive intervention**

After schools administer the screening measure(s), they will have information regarding MH/BH and well-being of students as individuals and as groups of students. After collecting this information, the next crucial step is to use the results to drive intervention plans in order to adequately evaluate and assist all students identified by screening (Weist et al., 2007). Collecting universal screening data allows schools to better address specific issues that individuals are experiencing along with global issues



within the school as a whole. These data can provide schools an accurate starting point that allows for effective progress monitoring in addressing students' identified MH/BH needs (Dever et al., 2012). Finally, this information can encourage professional development among teachers and staff when they are trained to administer specific interventions to address the school's needs and improve students' MH/BH functioning (Dever et al., 2012).

More information regarding how use data to drive intervention can be found on pages 15-17 of the *School-Wide Universal Screening for Behavioral and Mental Health Issues: Implementation Guidance*:

([http://resources.oberlinkconsulting.com/uploads/compendiums/Screening\\_Guidance\\_Document.pdf](http://resources.oberlinkconsulting.com/uploads/compendiums/Screening_Guidance_Document.pdf)).

### **6. Evaluate progress**

After students have been screened and appropriate interventions have been implemented, it is important to engage in an ongoing evaluation process to determine the efficacy of the supports and processes with regard to student outcomes, school outcomes, and process outcomes. Progress monitoring is an essential component of any multi-tiered system of support (like PBIS) model. Any progress monitoring tools should consider the context and resources of the school and those involved in the process (e.g. teacher time to complete), and should involve clear measurement criteria (Vannest, 2012).

More information regarding how to evaluate progress and achieve student outcomes, system outcomes, and process outcomes can be found on pages 18-19 of the *School-Wide Universal Screening for Behavioral and Mental Health Issues: Implementation Guidance*:

([http://resources.oberlinkconsulting.com/uploads/compendiums/Screening\\_Guidance\\_Document.pdf](http://resources.oberlinkconsulting.com/uploads/compendiums/Screening_Guidance_Document.pdf)).

## **Mental Health, Social-Emotional, and Behavioral Screening and Evaluation Compendium**

1<sup>st</sup> edition (containing no-cost screening and evaluation tools):

[http://resources.oberlinkconsulting.com/uploads/compendiums/Final\\_Mental\\_Health\\_Screening\\_and\\_Evaluation\\_Compndium\\_with\\_bookmarks.pdf](http://resources.oberlinkconsulting.com/uploads/compendiums/Final_Mental_Health_Screening_and_Evaluation_Compndium_with_bookmarks.pdf)

2<sup>nd</sup> edition (containing no-cost *and* low-cost screening and evaluation tools):

<http://resources.oberlinkconsulting.com/uploads/compendiums/Compendium-Version-2.pdf>