



## LEARNING NEEDS SCREENING TOOL

### Background & Development

The Learning Need Screening Tool is a brief, oral interview developed through an intensive authentic research project for the State of Washington Division of Employment and Social Services Learning Disabilities Initiative (November 1994-June 1997).

Funded by federal and state resources, the research as well as the Learning Needs Screening Tool are in the public domain and can be accessed by anyone who wishes. However, prior to implementation or use in a program or system several facts must be noted:

- The research was conducted with a welfare clientele; thus the tool is not valid with other populations. Use with other populations not having the same or similar characteristics as the research study could lead to misinterpretation of information and put the client screened by the Tool at risk as well as the entity using the Tool.
- The Learning Needs Screening Tool has not been validated and is not an appropriate tool to use in its present form with populations who have limited English proficiency (LEP).
- Criteria for implementation and use must be explored and clearly established in order to minimize discrimination or perceived bias when providing services. A set of standards for services should be established to ensure protection of the client and the entity using the Tool.
- All individuals should be screened for health-related needs (physical, vision, hearing, etc.) as well as other impacts (mental and emotional health) that may manifest as learning disabilities. This may mean adopting a more intensive interview protocol as a next step after initial screening. Simply screening for a condition does not allow the user to make the assumption that the individual has the condition for which he/she is being screened.
- Appropriate referrals and resources must be put into place prior to implementation. An organization or program cannot simply screen individuals without having the next steps (e.g., evaluation and medical services) in place. The Tool has been validated through the research and in using the Tool, the user accepts the responsibility associated with using a valid screening tool.
- Protocols for confidentiality and disclosure of information must be established.
- The organization or system's capacity to serve individuals with learning disabilities and other cognitive disorders must be evaluated.
- **The Learning Needs Screening Tool is not a diagnostic tool and should not be used to determine the existence of a disability.**

The Learning Needs Screening Tool is a powerful tool that with the right planning, implementation, and evaluation protocols put into place, can promote a strong service delivery model for welfare to work participants and the entities serving them.

Provided by Nancie Payne, Payne & Associates, Inc.



## **LEARNING DISABILITIES**

**A Report by the State of Washington  
Department of Social and Health Services  
Economic Services Administration  
WorkFirst Division**

**September 29, 1998**

# **EXECUTIVE SUMMARY**

## **WASHINGTON STATE LEARNING DISABILITIES PROJECT**

**September 29, 1998**

### **Overview:**

In 1997, Washington State implemented Temporary Assistance to Needy Families (TANF) and WorkFirst. Families have a life time limit of five years for the receipt of TANF. WorkFirst emphasizes employment as the first option to achieving economic self-sufficiency. Some TANF families experience barriers to employment and self-sufficiency as a result of family violence, medically fragile children, alcohol/substance abuse, physical and mental disabilities. Learning Disabilities (LDs) among the adult population may also impede successful employment. Many families with special needs obtain employment without any special assistance while others may require intervention in order to obtain and retain employment. These families have often been referred to as the "hard to serve".

According to estimates derived from the latest research conducted through the National Institutes of Health on related disabilities, 15 to 20% of the U.S. population have some form of LD. Most people who experience LDs often have a higher than average IQ. Research also indicates that most adults adapt to these disabilities enabling them to lead productive and meaningful lives.

### **Purpose:**

Identifying barriers to employment and job retention enables the Department of Social and Health Services (DSHS) to provide the appropriate interventions. In 1994, Washington State began a pilot project to develop a brief screening tool to assist DSHS Case Managers and Social Workers in identifying participants whose LD might impede successful employment and attainment of self-sufficiency. In partnership with Job Service Specialists, some Private Industry Councils, Community College educators, and other social service agencies could provide meaningful interventions for participants of the former Aid to Families with Dependent Children (AFDC) and current TANF programs.

### **Project Goals:**

- Provide instructional accommodations and medical interventions;
- Develop a brief screening tool to be used to identify TANF recipients who may need further assessment; and
- Increase WorkFirst Case Managers' and Social Workers' knowledge of the specific needs of persons with LD.

## **Findings:**

**The Brief Screen for LD correction classified 74% of the participants as LD or non-LD, positively identifying 70% of the participants with LD and correctly ruling out 79% of those without an identified special learning need.** Compared to those who were not identified by the screen, participants without a special learning need who were positively identified by the screen tended to have lower IQ scores and were more likely to report problems with long term substance abuse, multiple sinus problems, and prolong high fever.

The LD Project was timely in that it coincided with welfare reform. Families with special needs have the greatest barriers to overcome, and potentially require the greatest amount of time to resolve their issues. Early intervention assists these families to move off of welfare and to become self-sufficient. The **Learning Needs Screening Tool** will be helpful in identifying possible learning needs or deficits that potentially impact the participant's ability to obtain and maintain employment failing job search or participants demonstrating an inability to remain employed, are likely candidates for LD screening. This information will help participants find occupations that match the participant's strengths and avoid occupations that require performance in areas of weakness.

## **Participant research data – collected 1994 - 1998**

Nine Sites: mix of Urban & Rural

Number of participants 672

Majority of participants Single Parents (Mothers)

Age: 16 - 58 with average age 26

23% had a High School Diploma

14% had completed a GED

60% stated no secondary completion

36% were working on Secondary Completion

The average grade left was 10.3 (tenth grade, third month)

40% of the Participants (17-24) reported previous diagnosis of LD

43% of Participants (above 25) reported previous diagnosis of LD

## **Findings from Research**

44% identified with Learning Disabilities

3% identified with Mental Limitations

10% identified as Slow Learners

43% identified with no Detectable Disorder

This research was replicated in several other states including

# SCREENING FOR SPECIAL NEEDS & LEARNING DISABILITIES

## Some Points to Consider

As a case manager in a Welfare to Work program, an employment and training specialist working in a one-stop center, or an adult education teacher or literacy provider the subject of screening for special needs, particularly learning disabilities is frequently a topic of conversation. While there is a great amount of debate as to whether screening for special needs should occur, there is also a significant amount of discussion around the definition of screening as well as its purpose.

First, let's clarify why screening for special needs and learning disabilities should be an important discussion within adult education, literacy, welfare to work and employment and training arenas. It is estimated that approximately 15 percent of the American workforce have a learning disability and most don't know it (Department of Labor, 1997). In 1998 Rehabilitation Services Administration (RSA) reported that learning disabilities was the fastest growing impediment to employment among those eligible for rehabilitation services. Additionally, RSA reported that the secondary student who has learning disabilities comprises the highest percentage of dropouts--both from school and jobs (FISA, 1998). Furthermore, some states are reporting a 94 percent dropout rate from vocational technical schools. By 1998 RSA identified a 487 percent rise in those consumers with learning disabilities seeking employment--a figure RSA expects to escalate within the next two to three years. Adult education and literacy-based programs report 50 to 85 percent of the student population having special learning needs. Reports estimate business and industry incurs a one billion dollar loss in productivity attributed to hidden or unknown learning disabilities (DOL, 1997). Given this data, screening for special needs begins to become a critical factor of adult education and employment and training related human services.

Screening. A possibly over used word with multiple meanings. Webster's dictionary defines the word screening as a system for grouping people or a method to select, consider or group by examining systematically. Medical references further define screening as a preliminary procedure, such as a brief test or examination, to detect the most characteristic sign or signs of a disorder that may require further investigation (Mosby's Medical and Nursing Dictionary). There are two key factors within these definitions. The first is the reference to *a preliminary procedure* and the second refers to a system or *systematic procedure*. The definition further implies that those screening know the *characteristic signs* to look for as well as the *next steps for further investigation*. Simply stated then, screening for special needs and/or learning disabilities is a preliminary part of a whole assessment procedure, that is systematically implemented, to look for specific characteristics of the disability and decide whether further investigation or assessment is warranted. Neil Sturomski, Sturomski & Associates states in Supporting Adults with Learning Disabilities and other Special Learning Needs (1997) that "assessment refers to the gathering of relevant information which can be used to help an adult make decisions, and provides a means for assisting an adult to live more fully. " He goes on to state that "The first stage of assessment is usually screening. Screening methods use abbreviated, informal methods to determine if an individual is at-risk for a learning disability. Examples of informal methods

include, but are not limited to: an interview; reviews of medical, school or employment histories; written answers to a few questions; or a brief test. “Finally, he states "It is important to understand, however, that being screened for special needs or a learning disability is different from completing a thorough assessment.”

Given Mr. Sturomski's description of screening it is important to identify screening factors. These factors make up the framework for identification of services, resources, and referrals.

- Factor 1. Vision acuity and developmental functions
- Factor 2. Hearing acuity
- Factor 3. Medical and health related conditions
- Factor 4. Substance abuse and treatment
- Factor 5. Extreme attention difficulties
- Factor 6. Performance levels in school, training and/or employment
- Factor 7. Participation level in current activities
- Factor 8. Communication and social difficulties
- Factor 9. Time management and organization
- Factor 10. Behaviors and psychological manifestations

Each of these factors can be the result of special needs and/or a learning disability, be co-existent with special needs and/or a learning disability or be mistaken for special needs and/or a learning disability. Thus, the person conducting the screening must *know some about each factor* and *have well-developed observation and interviewing skills*. That requires a commitment to training and development.

All too often one hears the myth, that if you screen, using a “researched tool with a referenced baseline score,” you can by-pass the diagnostic phase and go directly to providing accommodations. That is far from the truth. Recalling that screening is *a preliminary systematic procedure to reveal major characteristic signs and identify the next steps for further investigation*, then it is safe to assume accommodations cannot be provided until a more intensive assessment or diagnostic process occurs. When accommodations are identified and provided many times the implication or assumption is that the individual receiving the accommodations has a diagnosed disability. If the goal of screening is to provide accommodations how can that be accomplished without an in depth evaluation of the individual's potential compared to his or her knowledge, skills, and present functioning abilities?

Screening is the beginning step of diagnosis in the “whole” of assessment. Screening is not diagnosis, but a crucial step to making recommendations for effective and efficient use of resources. Screening requires time as well as a system that frames the process.

Written by Nancie Payne, President/CEO, Payne & Associates, Inc. All rights reserved. Nancie provides professional development and consultation for welfare to work and employment and training programs as well as provides program and policy development and evaluation establishing equitable services for diverse populations.

## ***SCREENING FOR LEARNING DISABILITIES CRITERIA TO CONSIDER***

- ◇ When should screening be done--at what point in the delivery of services?
- ◇ What time is needed to do the screening selected?
- ◇ Who will do the screening?
- ◇ Where (physically) does screening occur?
- ◇ What training and/or level of education should individuals conducting screening possess?
- ◇ What additional training needs to be provided? How often?
- ◇ What happens when there is staff turnover?
- ◇ Who (which clients) should be screened? How is this determined to ensure fairness and reduce discrimination?
- ◇ What resources will be needed before, during and after screening occurs for the organization, the individual conducting the screening and the client?
- ◇ What other systems or protocols should be put into place prior to beginning screening?
- ◇ How does the organization recognize and honor the values and desires of the client, especially those who come from diverse backgrounds where disability is not a condition that is accepted or embraced?
- ◇ What is the organization's capacity to serve clients identified by the screening procedure as needing additional services?
- ◇ Are there standards for regular and additional services?
- ◇ Who needs to know what has been done and the results?
- ◇ What are the policies and procedures regarding confidentiality?
- ◇ When do accommodations become an element of services?

- ◇ What are the standards for implementation of accommodations?
- ◇ Where are resources for accommodations-who determines what is reasonable?
- ◇ Who knows how to assess for, identify, implement and evaluate accommodations - in training and on the job?
- ◇ Who becomes the point of contact for the organization, staff, and customers?
- ◇ How does screening lead to:
  - Productive training
  - Job placement
  - Job retention
  - Wage progression
- ◇ How does screening and related services affect transition and coordination among providers internally as well as externally?
- ◇ How do organizations monitor and evaluate the appropriateness and effectiveness of screening and other related services?
- ◇ **HOW DO WE PROVIDE TRUE HELP AND CREATE SELF-ADVOCACY LEADING TO SELF-SUFFICIENCY?**

# **PRE-ASSESSMENT OF AVAILABLE DIAGNOSTICS & RELATED REFERRALS**

Qualified professionals must perform evaluations and diagnoses of learning disabilities and other co-existing conditions. Qualified professionals are individuals highly trained to conduct assessments. Often professionals have been certified to select, perform and interpret a variety of neurological, neuropsychological, psychological, psychiatric, educational, and vocational assessment instruments. Different assessment and diagnostic procedures as well as licensing are required for different medical, psychiatric and psychological conditions. Factors to consider when identifying qualified professionals might include acceptable qualifications/credential of the provider, number of participants to be served and the provider's capacity to serve them, and the cost of the learning disabilities evaluation or service.

## **Possible Sources of Qualified Professionals**

- ⊗ Department of Rehabilitation Services
- ⊗ Community Colleges/Universities
- ⊗ Medical Schools/Centers (Teaching Universities with Neurological, Neuropsychological, Psychological, Psychiatric Departments)
- ⊗ University-affiliated Hospitals
- ⊗ Educational Psychologists and Guidance Counselors in High Schools
- ⊗ Mental Health Agencies/Services
- ⊗ Local City/county Public Schools
- ⊗ Local Offices for Superintendent of Schools
- ⊗ Local County Offices of Education
- ⊗ Adult Schools (Adult Education and Literacy Professionals)
- ⊗ Private Schools or Institutions Specializing in Learning Disabilities
- ⊗ Associations Specializing in Learning Disabilities Services (Private Diagnosticians, Specialists, Therapists, Psychologists and Neuropsychologists)
- ⊗ Learning Disabilities Associations
- ⊗ International Dyslexia Association
- ⊗ Community-based Organizations that Serve Individuals with Learning Disabilities

# PRIORITIZING REFERRAL STEPS

Based on screening/collection of information the following are a suggested referral order if possible:

## Neurology evaluation

- Head injuries of significance
- Convulsions
- Seizure disorders

## Medical examination

- Ear, throat, nose
- Diabetes (high blood sugar)
- Headaches, migraines
- Allergies, asthma
- Review/renew medications
- Other serious problems

## Medical and Health-related needs including internal and physical

- Vision screening (general optometry evaluation)
- Developmental/Behavioral Vision Assessment (specialized)
- Audiological evaluation
- Speech and Language evaluation

## Psychiatric needs – Depression, Anxiety, Post Trauma, etc.

- Treatment programs

## Attention Deficit Hyperactivity Disorder

## Learning Disabilities Evaluation

## Therapeutic Counseling

*It may be important to let the referral/professional know that you are trying to address issues that are mimicking the characteristics of learning disabilities in order to determine whether a learning disabilities evaluation/diagnosis is eventually needed.*

The exception to the list is *Treatment Programs*. Depending on the type of treatment needs, it may be appropriate to proceed with a referral to treatment after an Attention Deficit Hyperactivity Disorder evaluation and/or a Learning Disability evaluation. The results of these evaluations may be beneficial to the treatment staff, especially if accommodations are warranted. **However, a word of caution**—if treatment needs are substance-based (alcohol or chemical/drug), then the referral for an Attention Deficit Hyperactivity Disorder evaluation and/or a Learning Disability evaluation should not be made until there has been adequate time for the effects of the substance to be evaluated. Serious and/or long-term significant use of substances alters brain functions. Elimination of the substance from the system (body and brain) must occur for a long enough time period to receive accurate results from any cognitive-based evaluation as well as measure any damage done by the substance(s).

The information supplied in the Learning Disabilities evaluation should provide direction regarding referrals if nothing has been done in advance of the referral.

# LEARNING NEEDS SCREENING TOOL

## Question Descriptions and Follow-up Explanations

The following are descriptions, background, rationale, and follow-up explanations of the thirteen questions contained on the Learning Needs Screening Tool.

### Section A

#### 1. Have you had any problems learning in middle school or junior high?

- ◆ These are typically grades six-eight, sometime through grade nine.
- ◆ Learning problems are sometimes more frequent due to the multiple classrooms, teachers, and activities.
- ◆ Learning problems could include being held back, special reading or math groups, tutoring during or after school, behavior, or just couldn't learn, etc.

#### 2. Do any family members have learning problems?

- ◆ Family is defined as immediate – parents, siblings, grandparents.
- ◆ Learning Disabilities have a genetic frequency in families.
- ◆ Learning problems could include all cited in question 1 as well as not finishing school, difficulties reading, writing, etc.

#### 3. Do you have difficulty working with numbers in a column?

- ◆ This pertains to simple one, two or three digit numbers and mostly has to do with visual skills, visual-spatial orientation and alignment.

- ◆ Example:

42	678	9	234
12	+346	-3	-78
<u>+39</u>			

#### 4. Do you have trouble judging distances?

- ◆ Examples to use for “judging distance” are the number of car lengths between two parked cars, what two or three blocks represents, the length of a hallway, or the distance between two people.
- ◆ Spatial orientation and visual skills.

#### 5. Do you have problems working from a test booklet to an answer sheet?

- ◆ Most tests in schools have a test booklet that cannot be written in and a “bubble” answer sheet set up in columns/rows.
- ◆ Ask if the person remembers taking an achievement test in grade school or high school. Then follow-up with questions about “bubbling” in or putting answers in the right columns/rows.
- ◆ Visual discrimination and visual-spatial skills; writing, visual-motor, and tracking.

## **Section B**

### **6. Did you have any problems learning in elementary school?**

- ◆ Elementary school is usually grades kindergarten through fifth or sixth.
- ◆ Typically those who experienced problems learning were in special reading groups (blue group or the red birds), disliked school, were in “pull-out” programs, were in trouble a lot, wanted to learn but were frustrated, etc.
- ◆ Establishes a history of problems.

### **7. Do you have difficulty or experience problems mixing mathematical signs (+/x)?**

- ◆ The best way to describe this question is to write a plus sign on a piece of paper, hold it up to the client, and turn it so it becomes a multiplication sign and ask: “Do math signs ever do this?”
- ◆ Visual-spatial and visual discrimination skills.

## **Section C**

### **8. Do you have difficulty remembering how to spell simple words you know?**

- ◆ Examples of simple words are was, where, their, there, table, teach, apple, etc.
- ◆ These are words that the individual should be familiar with but has difficulty spelling or complains look wrong or different even when spelled correctly.
- ◆ Individuals with this difficulty may have trouble with writing, visual-motor skills, recall, word retrieval, or visual discrimination skills.

### **9. Do you have difficulty filling out forms?**

- ◆ Forms are defined as anything requiring information be written into designated spots on a pre-printed paper.
- ◆ Follow-up with a questions regarding the individual’s ability to read and interpret the form.
- ◆ This could be the result of writing, visual-motor, visual discrimination, reading and interpretation, sequencing, organization, attention and concentration, visual tracking, etc.

### **10. Did you (do you) experience difficulty memorizing numbers?**

- ◆ Numbers are abstract concepts and require sequencing, organization and connecting parts to wholes/wholes to parts.
- ◆ Most individuals with learning difficulties had significant trouble with multiplication tables and could not conquer fractions.
- ◆ Follow-up with a question about memorizing times tables or steps to subtract or divide.
- ◆ Second follow-up could be recall of phone numbers. Could also relate to dates/times (history dates or appointment times).

## **Section D**

### **11. Do you have trouble adding and subtracting small numbers in your head?**

- ◆ Small numbers is defined as numbers less than 20.
- ◆ Possible difficulty involving sequential concepts, visualization, abstract concepts, recall, and part to whole skills, etc.

### **12. Do you have difficulty or experience problems taking notes?**

- ◆ Notes are defined as written/picture-based information briefly summarized from information presented in a meeting, lecture, training, etc.
- ◆ Note taking requires very sophisticated skills including auditory processing, synthesizing, sequencing and organizing, sorting, prioritizing, writing, visual-motor, and visual discrimination. Simultaneously processing.

### **13. Were you ever in a special program or given extra help in school?**

- ◆ Special programs includes resource room, special education, speech and language services, communication programs, before-in-after school tutoring, chapter programs, title I programs, and LAP (learning assistance programs).
- ◆ Could also include a teacher assistant, and Individual Education Plan (IEP), Transition Plan and/or a 504 plan for academic improvement, behavior modification or accommodations for medical/disability reasons.

These descriptions, background, rationale, and follow-up explanations of the thirteen questions contained on the Learning Needs Screening Tool are not meant to promote an in depth, intensive interview, but to clarify terms and meaning to obtain a truer response from the participant.