

Best Practices for Sharing Screening or Assessment Results with Students and Families

School mental health professionals use screening and assessment tools to support a wide array of data-informed decisions, including:

- universal mental health screening to detect potential unmet needs
- initial assessment for diagnosis and goal clarification
- ongoing progress monitoring during interventions (i.e., measurement-based care or MBC).

Regardless of the purpose, students and their caregiver(s) should always receive person-centered feedback about the screening or assessment results, have an opportunity to ask questions, share their perspectives about the results, and collaborate in decision making about next steps.

This document provides best practices for school mental health professionals' effective use of screening and assessment tools with students and families. When done in an inclusive, intentional, person-centered manner, review and discussion of assessment results can help school mental health professionals gain student and/or caregiver perspective, communicate humility and respect for their experience and wisdom, create a shared language, develop rapport, and promote authentic partnership.

Best Practices

1 Select Assessment Tools

- Ensure screening or initial assessment tools align with the intended purpose or decision (e.g., identify “positive screens” for further evaluation; “rule out” a diagnosis; prioritize intervention goals; monitor progress on student intervention goals).
- Where possible, select assessment tools in collaboration with students and/or caregivers. This can be done with an individual student and their caregiver after goals are clarified and before the intervention begins. Tools under consideration for school-wide administration (e.g., universal screening) can also be piloted with student or family groups to obtain input.
- Prioritize assessment tools that are brief, psychometrically sound and available in the preferred language of the student and/or caregiver.
- Identify any limitations of assessment tools for minoritized groups or age (e.g., get curious about norm-referenced assessments by checking the demographic characteristics of samples used in validation studies) and incorporate these in how you share and interpret the results with the student and family (see below).
- Consider including an individualized or “idiographic” measure of personal goal attainment, wellbeing, or functioning to complement a norm-referenced, standardized measure for ongoing progress monitoring.



Assessment Tools are Imperfect

Assessment is important, and everyone should have equal access to the assessment process, even if there isn't a measure normed for every student. School mental health professionals should partner with students and caregivers to decide which tool(s) are the best fit, create a shared language about items and make meaning of the results. Avoiding use of assessment tools for minoritized populations can amplify inequities in accessing evidence-informed interventions.

2 Administer Assessment Tools

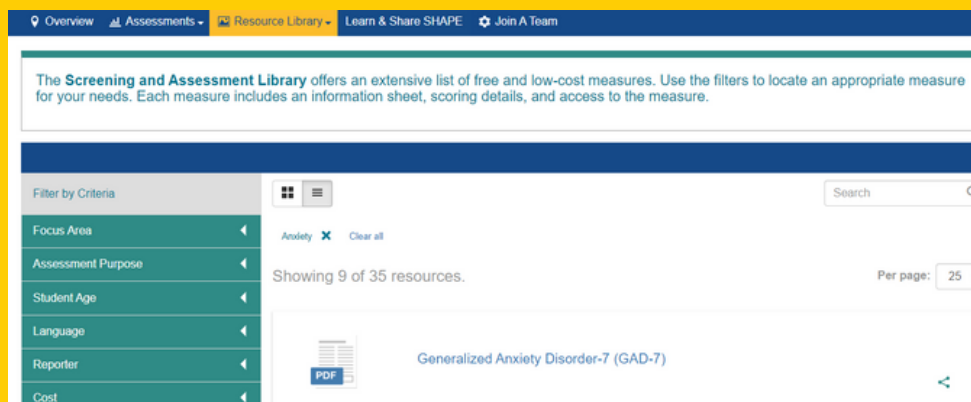
- Provide a clear rationale, including why you are doing the assessment and how it will be used prior to assessment as part of informed passive or active consent.
- Address privacy and confidentiality including data storage, data sharing (as applicable), FERPA/HIPAA protections and rights to access student records.
- If feasible, provide multiple ways to complete tools including in person, at home or work, and/or electronically based on student and family preference.
- Use inclusive practices with all students and families to promote equitable processes based on literacy levels and other abilities that may influence the experience of completing tools (e.g., offer to read questions aloud and/or complete with a school mental health professional).



Check out the Screening and Assessment Library on SHAPE!

This resource is a searchable library of free or low-cost screening and assessment measures. Additional resources for schools related to best practices in universal mental health screening, early intervention and treatment services, and monitoring impact of interventions can be found in the Resource Library of The SHAPE System.

Available here: <https://theshapesystem.com>



3 Share Results of Assessment Tools

- Use a student- and family-centered approach to share results.
- Ask open-ended questions to explore their perspective and gain a deeper understanding of scores in their own words.
- Use reflections to summarize what you hear.
- Try the “Ask-Provide-Ask” practice from motivational interviewing for sharing advice or health information:

? **ASK** e.g., “Is it okay if I share what I see from your scores and results?”



PROVIDE

- Provide summary scores to students and/or caregiver based on results and observations.
- Provide education on the score, measure and/or individual items, including norms, cutoffs, etc. as relevant.

? **ASK** e.g., “Does this match your experience/how you feel/how you think your student is doing?”

- Ask whether the score and interpretation matches their subjective experience.
- Discuss discrepancies between different respondents’ results (e.g., student, caregiver(s)) to understand different perspectives and explore opportunities for consensus. Note that child and caregiver disagreement on goals and progress is very common in child and adolescent assessment and can be clinically valuable when shared openly with respondents.
- Discuss discrepancies between assessment results and other data or information (e.g., teacher report, classroom observations). Consider how multiple sources of data can be used together to provide a more comprehensive picture of student needs, strengths and progress.

4 Make Decisions Together

- Appraise what the scores mean (e.g., shared understanding of student needs and strengths, functioning, progress).
- Brainstorm possible next steps and options which may include but are not limited to:
 - begin an intervention at this time or “watchful waiting”
 - referral or linkage to supports at school and/or in the community
 - adjustments to existing interventions provided
 - continue with the current plan
 - increase or decrease frequency, intensity type of interventions provided
 - successful “graduation” or “step down” from an intervention
- Use shared decision making to choose a plan of action.



Additional Resources

- [The SHAPE System](#)
- [Yale Measurement-Based Care Collaborative](#)
- [National Center for School Mental Health](#)
- [Using Student Data for Equity](#)
- [Best Practices in Universal Social, Emotional, and Behavioral Screening](#)

This resource was developed by Elizabeth H. Connors, PhD, Associate Professor of Psychiatry (Psychology), Division of Prevention and Community Research at the Yale School of Medicine. This resource is intended to be free and publicly available; no modification, sale or commercial use is permitted. Please include proper attribution. This resource is licensed under the Creative Commons (CC BY-NC-ND 4.0) license. The terms and conditions are available at: <https://creativecommons.org/licenses/by-nc-nd/4.0/>. Email elizabeth.connors@yale.edu with any questions.

For more information and related resources, visit: www.theshapesystem.com.

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