

## LD Screening as a Process

- § LD screening answers the question, “Should this person be referred for diagnosis of a learning disability?”
- § LD diagnosis answers the question, “Does this person have a learning disability?”

## Why bother with screening?

- § Undiagnosed adults with learning disabilities have little self-awareness and fewer strategies for success.
- § Diagnosed adults are protected from discrimination by federal law—and they are entitled to special services and accommodations.
- § Nobody can address the disability unless it’s been diagnosed.
- § Without screening, none of the above can happen, which leaves the adult in the same boat they’ve always been in.

## Washington State LD Screening Tool

- § Should only be used as part of a comprehensive screening process.
- § 72% reliable for TANF population, not adult education/literacy.
- § Setting up the interview is crucial to getting honest answers.
- § Must be done orally and privately.
- § Student copy is optional—it’s their choice to read along or not.
- § Explain the student’s rights under the Privacy Act.
- § Make sure the student understands the definition of learning disabilities before you proceed.
- § There must be a discussion AFTER the screening, too.
- § Not appropriate for ESOL students unless they have been in U.S. schools for years and are fluent with the English language and culture.

## Washington State Screening Tool

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### Using the tool

- You will ask each question orally and record the student's response. You MUST administer the screening orally or it won't be valid.
- Give the student the Student Copy if they want to read along. They should NEVER use this to fill out their own responses.
- Tell the student that the responses will usually be either "Yes" or "No."
- Explain the student's rights regarding confidentiality.
- Make sure the student doesn't have any unanswered questions about the process or the screening.

### How to score

- See directions on page 3 of the tool.

### While doing the screening

- If the student answers "sometimes," clarify the response. If "sometimes" means once or seldom, that's a "no." If "sometimes" means frequently, that's a "yes."
- Always define or clarify words or phrases that are unfamiliar to the student.
- It's okay to give follow-up responses with additional questions, but don't lead responses. Give objective examples, definitions, or descriptions when necessary.

### Reviewing the process

- Summarize the results and make recommendations for next steps; e.g., continuation of screening process, resources and referrals.
- Answer any questions the student may have.
- See final page of instructions regarding students who score 12+.

### Note

- You must have a signed, confidential release-of-information form before any confidential information can be released to any internal or external sources.
- This tool is not appropriate for students who speak English-as-a-Second-Language, unless the student has attended school in the U.S. for a number of years and is fluent in the English language.

Washington State Learning Disabilities Screening

Interviewer Name: \_\_\_\_\_

Interview Date: \_\_\_\_\_

Student Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Gender ? Male ? Female

How many years of school have you had? \_\_\_\_\_

Check all earned  High School Diploma  GED  
 Technical/Vocational Certificate  
 AA Degree  Other  
(specify): \_\_\_\_\_

What kind of job would you like to have? \_\_\_\_\_

Do you have experience in this area?  Yes  No

What makes it hard for you to get or keep this kind of job?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

See final page for directions and scoring.

This screening is not a diagnostic tool and cannot be used to determine the existence of a disability.

Washington State LD Screening Tool		Section A
1. Did you have any problems learning in middle school or junior high school?		<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do any family members have learning problems?		<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do you have difficulty working with numbers in columns?		<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Do you have trouble judging distances?		<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Do you have problems working from a test booklet to an answer sheet?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Count the number of "Yes's" for Section A		_____ x 1 = ____

		Section B
6. Do you have difficulty or experience problems mixing arithmetic signs (+/x)?		<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Did you have any problems learning in elementary school?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Count the number of "Yes's" for Section B		_____ x 2 = ____

		Section C
8. Do you have difficulty remembering how to spell simple words you know?		<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Do you have difficulty filling out forms?		<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Did you (do you) experience difficulty memorizing numbers?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Count the number of "Yes's" for Section C		_____ x 3 = ____

		Section D
11. Do you have trouble adding and subtracting small numbers in your head?		<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Do you have difficulty or experience problems taking notes?		<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Were you ever in a special program or given extra help in school?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Count the number of "Yes's" for Section D		_____ x 4 = ____

Enter Total "Yes's" Multiplied by Factor Indicated for Sections A, B, C, D	
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See final page for directions and scoring.

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Notes \_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

Directions for Scoring

1. Ask the student each question in Sections A, B, C, and D.
2. Record the student’s responses, checking “Yes” or “No.”
3. Count the number of “Yes” responses in each section.
4. Multiply the number of “Yes” responses in each section by the number shown in the section total. For example, multiply the number of “Yes” responses in Section C by 3.
5. Record the number obtained for each section in the space provided in that section.
6. To obtain a Total Score, add the subtotals from Sections A, B, C, and D.
7. If the Total Score is 12 or more, begin a comprehensive screening process and/or contact Patti White at 800.569.3539 or [prwhite@madisoncounty.net](mailto:prwhite@madisoncounty.net) for further assistance and recommendations.

The Washington State Learning Disabilities Screening was developed for the Washington State Division of Employment and Social Services Learning Disabilities Initiative (November 1994-June 1997) under contract by Nancie Payne, Senior Consultant, Payne & Associates, Olympia, Washington.

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## Student Copy

- How many years of school have you had?
- Check all earned:
  - \_\_\_ High School Diploma
  - \_\_\_ GED
  - \_\_\_ Technical / Vocational Certificate
  - \_\_\_ AA Degree
  - \_\_\_ Other (specify)
- What kind of job would you like to have?
- Do you have any experience in this area?
- What makes it hard for you to get or keep this kind of job?
- What would help?

1. Did you have any problems learning in middle school or junior high school?
2. Do any family members have learning problems?
3. Do you have difficulty working with numbers in columns?
4. Do you have trouble judging distances?
5. Do you have problems working from a test booklet to an answer sheet?
6. Do you have difficulty or experience problems mixing arithmetic signs (+ / x )?
7. Did you have any problems learning in elementary school?
8. Do you have any difficulty remembering how to spell simple words you know?
9. Do you have difficulty filling out forms?
10. Did you (do you) experience difficulty memorizing numbers?
11. Do you have trouble adding and subtracting small numbers in your head?
12. Do you have difficulty or experience problems taking notes?
13. Were you ever in a special program or given extra help in school?