Social-Emotional and Adaptive Assessment of School-Age Children:

Administration and Interpretation of the Behavioral Assessment System for Children (BASC-3), Social Skills Intervention System (SSIS), and Vineland-3

Presenter: J. Lynsey Psimas, PhD
Clinical Assessment Consultant
Pearson

Agenda

- Behavioral Assessment System for Children, 3rd Ed. (BASC-3)
- Student Observation System (SOS)
- Structured Developmental History (SDH)
- Parenting Relationship Questionnaire (PRQ)
- BASC-3 Intervention Guide (BIG)
- BASC-3 Behavioral & Emotional Skill-Building Guide
- BASC-3 Flex Monitor
- Behavioral and Emotional Screening System (BESS)

Purpose and Benefits of BASC-3

- Uses a multidimensional approach for conducting a comprehensive assessment
  - clinicians can better understand student emotions and behavior from a variety of perspectives
- Strong base of theory and research
- Useful for identifying behavior problems as required by IDEA, and for developing FBAs, BIPs, and IEPs
- Assists with Differential diagnosis (i.e. hyperactivity and attention problems)
- Helps determine educational eligibility for special education
- Aides in design of treatment plans
- Allows clinician to progress monitor using evidence-based interventions
- Highlights emotional and behavioral strengths - Not just problem behavior

What is BASC-3?

- A comprehensive set of rating scales and forms including:
  - Teacher Rating Scales (TRS)
  - Parent Rating Scales (PRS)
  - Self-Report of Personality (SRP)
  - Student Observation System (SOS)
  - Structured Developmental History (SDH)

- Together, they help you understand the behaviors and emotions of children and adolescents.

Qualification Level: B
Age Range: 2:0 - 21:11 (TRS and PRS); 6:0 through college age (SRP)
Other Languages: Spanish (Parent and Self-Report)

RTI Tiers: RTI Levels 2 and 3
Completion Time: 10-20 minutes (TRS and PRS), 30 minutes (SRP)
Scores/Interpretation: T scores and percentiles, for a general population and clinical populations
Scoring Options: Q-global™ Web-based Administration, Scoring, and/or Reporting, or Manual Scoring.
Publication Date: Available August, 2015
Authors of BASC-3

Randy W. Kamphaus, Ph.D.  Cecil R. Reynolds, Ph.D.

BASC-3 Revision Goals

- Maintain measurement integrity and quality
- Improve integration of components
- Improve item content, scale reliability, and score inference validity
- Offer new content scales without lengthening the rating scales significantly
- Enhance flexibility of administration and reporting options
- Enhance progress monitoring
- Enhance links and implementation to verified intervention strategies

What is the BASC-3?

A Multidimensional, Multimethod approach to assessing child and adolescent Emotional Disabilities.

Multi-Dimensional System

- Multidimensional - Measures different aspects of behavior and personality
- Includes:
  - Positive, adaptive dimensions such as leadership, social skills, and study skills.
  - Negative, clinical dimensions such as aggression, anxiety, and depression.

Multi-Method System

TRS: Teacher Rating Scales
PRS: Parent Rating Scales
SRP: Self-Report of Personality
SRP-I: Self-Report of Personality Interview (ages 6-7)
PRQ: Parenting Relationship Questionnaire
SDH: Structured Developmental History
SOS: Student Observation System

Comprehensive Diagnostics & Behavior Management

SCREEN
ASSESS/DIAGNOSE
INTERVENE
MONITOR

• Behavior & Emotional Screening System (BESS)
• Teacher Rating Scales (TRS), Parent Rating Scales (PRS), Self-Report of Personality (SRP)
• Parenting Relationship Questionnaire (PRQ)
• Structured Developmental History (SDH)
• Student Observation System (SOS)

• Behavior Intervention Guide
• Behavioral and Emotional Skill-Building Guides—classroom and psychologist versions
• Parent tip sheets
• Evidence-based interventions matched to examinee profiles

• FLEX Monitor
• Fixed monitor
• Student Observation System (SOS)
• Treatment Fidelity Documentation
BASC-3 Diagnostic Components

- **SDH**: The Structured-Developmental History
  - All ages
- **SOS**: Student Observation System
  - All ages
- **SRP**: Self-report of Personality
  - SRP-I: Ages 6-7
  - SRP-C: Ages 8-11
  - SRP-A: Ages 12-21
  - SRP-COL: Ages 18-25
- **PRS**: Parent Rating Scales
  - PRS-P: Ages 2-5
  - PRS-C: Ages 6-11
  - PRS-A: Ages 12-21
- **TRS**: Teacher Rating Scales
  - TRS-P: Ages 2-5
  - TRS-C: Ages 6-11
  - TRS-A: Ages 12-21
- **PRO**: Parenting Relationship Questionnaire
  - Ages 2-18

All Are Available via Paper and Q-Global/Digital
All Forms (Except TRS) are Available in English and Spanish

The American Academy of Pediatrics (AAP)

The American Academy of Pediatrics (AAP) report on diagnosis of ADHD

- In 2000, the American Academy of Pediatrics (AAP) noted that ADHD is a common problem and becoming increasingly a controversial one...
  - The AAP recommended broad diagnostic work that is largely behaviorally-based.

  *(AAP Committee on Quality Improvement, 2000)*

These recommendations apply not just to DSM diagnoses...

- The criteria for classification of a student as *Emotionally Disturbed* under IDEIA requires that we look broadly at children, the context of their behavior, history, and acuteness/chronicity.

IDEIA’s Definition of Emotional Disturbance

- The term means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child’s educational performance:
  - An inability to learn that cannot be explained by intellectual, sensory, or health factors;
  - An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
  - Inappropriate types of behavior or feelings under normal circumstances;
  - A general pervasive mood of unhappiness or depression;
  - A tendency to develop physical symptoms or fears associated with personal or school problems;
- The term includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance.

ISBE’s Definition of Emotional Disability

- **Emotional Disability** (includes schizophrenia but does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance) means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child’s educational performance:
  - An inability to learn that cannot be explained by intellectual, sensory, or health factors;
  - An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
  - Inappropriate types of behavior or feelings under normal circumstances;
  - A general pervasive mood of unhappiness or depression; or
  - A tendency to develop physical symptoms or fears associated with personal or school problems.
Social Maladjustment

• “...there is a final, perhaps fatal flaw in this practice. The “Achilles heel” in this regard may be the problem of co-occurrence or comorbidity...” (p. 903)

• Comorbidities are common in childhood psychopathology and being socially maladjusted does not make one immune from ED’s.


Poor Academic Outcomes Associated with Presence of an ED

• Lower grades and poor attendance rates (Suldo, Thalji, & Ferron, 2011)

• Greater incidence of adolescent smoking (Lewis et al., 2011), illicit substance use (Goodman, 2010), and alcohol.

• More mental health disorders in early adulthood (Johnson, Cohen, & Kasen, 2009; Kinnunen, Laukkanen, & Kylma, 2009).

• Only 20% of students in special education with emotional and behavioral disorders pursue any type of post-secondary education (Wagner, Kutash, Duchnowski, & Epstein, 2005).

Development of the BASC-3

• Items were selected based on:
  – Standardized item loading in SEM analyses (English & Spanish)
  – Item-total correlation
  – Item bias statistics
  – Construct relevance
  – Clinical groups discrimination

• General normative sample was be stratified by:
  – Gender by race/ethnicity
  – Gender by geographic region
  – Gender by parent education level

Development & Standardization

BASC3 Standardization Sites Map
Development of PRS & SRP Spanish Forms

- Firm experienced in translating psychological tests completed initial translation of all existing items.
- New items evaluated and back-translated by in-house staff.
- Bilingual psychologists from across US reviewed the materials.
- Additional rounds of changes were conducted to come up with standardization item sets.
- Psychometric properties of Spanish items were evaluated prior to making final item selections.

Teacher Rating Scales (TRS) and Parent Rating Scales (PRS)

TRS & PRS – What’s New?

- On average, across the TRS and PRS forms there are 32% new items.
- Significant addition to Developmental Social Disorder items.
- Significant addition to Executive Functioning items
  - Based on research by Dr. Mauricio A. Garcia- Barrera of the University of Victoria, BC, Canada.
  - 4 new EF subscales: Problem Solving, Attentional Control, Behavioral Control, and Emotional Control

BASC-3 Scale Types

<table>
<thead>
<tr>
<th>Scale Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical</td>
<td>Measures maladaptive behaviors, where high scores indicate problematic levels of functioning.</td>
</tr>
<tr>
<td>Adaptive</td>
<td>Measures adaptive behaviors or behavioral strengths, where low scores indicate possible problem areas.</td>
</tr>
<tr>
<td>Content</td>
<td>Measures maladaptive or adaptive behaviors. Some unique items, some clinical and adaptive items.</td>
</tr>
<tr>
<td>Composite</td>
<td>Comprised of scale groupings that are based on theory and factor analytic results.</td>
</tr>
<tr>
<td>Probability Indexes</td>
<td>Empirically derived scales comprised of items from other scales that were selected based on their ability to differentiate those with and without behavioral or emotional functioning diagnosis or classification.</td>
</tr>
</tbody>
</table>
TRS/PRS Clinical Scales

<table>
<thead>
<tr>
<th>Clinical Scale</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aggression</td>
<td>The tendency to act in a hostile manner (either verbal or physical) that is threatening to others</td>
</tr>
<tr>
<td>Anxiety</td>
<td>The tendency to be nervous, fearful, or worried</td>
</tr>
<tr>
<td>Attention Problems</td>
<td>The tendency to be easily distracted and unable to concentrate more than momentarily</td>
</tr>
<tr>
<td>Atypicality</td>
<td>The tendency to behave in ways that are considered “odd” or commonly associated with psychosis</td>
</tr>
<tr>
<td>Conduct Problems</td>
<td>The tendency to engage in antisocial and rule-breaking behavior, including destroying property</td>
</tr>
<tr>
<td>Depression</td>
<td>Feelings of unhappiness, sadness, and stress that may result in an inability to carry out everyday activities or may bring on thoughts of suicide</td>
</tr>
<tr>
<td>Hyperactivity</td>
<td>The tendency to be overly active, rush through work or activities, and act without thinking</td>
</tr>
<tr>
<td>Learning Problems</td>
<td>The presence of academic difficulties, particularly understanding or completing homework</td>
</tr>
<tr>
<td>Somatization</td>
<td>The tendency to be overly sensitive to and complain about relatively minor physical problems and discomforts</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>The tendency to evade others to avoid social contact</td>
</tr>
</tbody>
</table>

BASC–3 TRS & PRS Sample Clinical Scale Items

- **Hyperactivity**
  - Acts without thinking
  - *Is in constant motion*
  - *Manipulates others*
- **Aggression**
  - Bullies others
  - *Hurts others on purpose*
- **Conduct Problems**
  - Disobeys
  - *Says, “I can’t do anything right”*
- **Anxiety**
  - Is fearful
  - *Has trouble making decisions*
- **Depression**
  - Is negative about things
  - *Complains of physical problems*
- **Somatization**
  - Is afraid of getting sick
  - *Has trouble making decisions*

Adaptive Scales

<table>
<thead>
<tr>
<th>Adaptive Scale</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activities of Daily Living</td>
<td>Skills associated with performing basic, everyday tasks in an acceptable and safe manner</td>
</tr>
<tr>
<td>Adaptability</td>
<td>The ability to adapt readily to changes in the environment</td>
</tr>
<tr>
<td>Functional Communication</td>
<td>The ability to express ideas and communicate in a way others can easily understand</td>
</tr>
<tr>
<td>Leadership</td>
<td>The skills associated with accomplishing academic, social, or community goals, including the ability to work with others</td>
</tr>
<tr>
<td>Social Skills</td>
<td>The skills necessary for interacting successfully with peers and adults in home, school, and community settings</td>
</tr>
<tr>
<td>Study Skills</td>
<td>The skills that are conducive to strong academic performance, including organizational skills and good study habits</td>
</tr>
</tbody>
</table>
### TRS/PRS Content Scales

<table>
<thead>
<tr>
<th>Content Scale</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anger Control</td>
<td>The tendency to become irritated and/or angry quickly and impulsively, coupled with an inability to regulate affect and self-control.</td>
</tr>
<tr>
<td>Bullying</td>
<td>The tendency to be intrusive, cruel, threatening, or forceful to get what is wanted through manipulation or coercion.</td>
</tr>
<tr>
<td>Developmental Social Disorders</td>
<td>The tendency to display behaviors characterized by deficits in social skills, communication, interests, and activities; such behaviors may include self-stimulation, withdrawal, and inappropriate socialization.</td>
</tr>
<tr>
<td>Emotional Self-Control</td>
<td>The ability to regulate one's affect and emotions in response to environmental changes.</td>
</tr>
<tr>
<td>Executive Functioning</td>
<td>The ability to control behavior by planning, anticipating, inhibiting, or maintaining goal-directed activity, and by reacting appropriately to environmental feedback in a purposeful, meaningful way.</td>
</tr>
<tr>
<td>Negative Emotionality</td>
<td>The tendency to react in an overly negative way and to any changes in everyday activities or routines.</td>
</tr>
<tr>
<td>Resiliency</td>
<td>The ability to access both internal and external support systems to alleviate stress and overcome adversity.</td>
</tr>
</tbody>
</table>

### Developmental Social Disorders Scale Items

<table>
<thead>
<tr>
<th>Adaptability</th>
<th>Adapts easily to new surroundings.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Adjusts well to changes in family plans.</td>
</tr>
<tr>
<td></td>
<td>Adjusts well to changes in plans.</td>
</tr>
<tr>
<td></td>
<td>Adjusts well to changes in routine.</td>
</tr>
<tr>
<td></td>
<td>Acts as if other children are not there.</td>
</tr>
<tr>
<td></td>
<td>Acts strangely.</td>
</tr>
<tr>
<td></td>
<td>Babbles to self.</td>
</tr>
<tr>
<td>Anger</td>
<td>Bangs head.</td>
</tr>
<tr>
<td></td>
<td>Confuses real with make-believe.</td>
</tr>
<tr>
<td></td>
<td>Seems out of touch with reality.</td>
</tr>
<tr>
<td></td>
<td>Seems unaware of others.</td>
</tr>
<tr>
<td></td>
<td>Shows feelings that do not fit the situation.</td>
</tr>
<tr>
<td></td>
<td>Avoids eye contact.</td>
</tr>
<tr>
<td></td>
<td>Engages in repetitive movements.</td>
</tr>
<tr>
<td></td>
<td>Shows basic emotions clearly.</td>
</tr>
<tr>
<td></td>
<td>Communicates clearly.</td>
</tr>
<tr>
<td></td>
<td>Is able to describe feelings accurately.</td>
</tr>
<tr>
<td></td>
<td>Is clear when telling about personal experiences.</td>
</tr>
<tr>
<td></td>
<td>Responds appropriately when asked a question.</td>
</tr>
<tr>
<td>Functional Communication</td>
<td>Shows interest in others’ ideas.</td>
</tr>
<tr>
<td></td>
<td>Has trouble making new friends.</td>
</tr>
<tr>
<td></td>
<td>Isolates self from others.</td>
</tr>
<tr>
<td></td>
<td>Prefers to play alone.</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>Outside same group activities.</td>
</tr>
</tbody>
</table>

### Clinical Probability Indexes

<table>
<thead>
<tr>
<th>Index</th>
<th>Teacher Rating Scale</th>
<th>Parent Rating Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADHD Probability</td>
<td>* * *</td>
<td>* * *</td>
</tr>
<tr>
<td>Emotional Behavior Disorder Probability</td>
<td>* * *</td>
<td>* * *</td>
</tr>
<tr>
<td>Autism Probability</td>
<td>* * *</td>
<td>* * *</td>
</tr>
<tr>
<td>Functional Impairment</td>
<td>* * *</td>
<td>* * *</td>
</tr>
<tr>
<td>General Clinical Probability</td>
<td>* * *</td>
<td>* * *</td>
</tr>
</tbody>
</table>
BASC-3 Self-Report of Personality Scales

<table>
<thead>
<tr>
<th>Scale Type</th>
<th>Child</th>
<th>Adolescent</th>
<th>College</th>
</tr>
</thead>
<tbody>
<tr>
<td>Composite Scales</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional Symptoms</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Inattention/Hyperactivity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internalizing Problems</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Personal Adjustment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Problems</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Clinical and Adaptive Scales</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol Abuse</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Anxiety</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attention Problems</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Attitude to School</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitude to Teachers</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Atypicality</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depression</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hyperactivity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interpersonal Relations</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Loss of Control</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relations with Parents</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>School Maladjustment</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

BASC-3 Self-Report of Personality Scales (cont.)

<table>
<thead>
<tr>
<th>Scale Type</th>
<th>Child</th>
<th>Adolescent</th>
<th>College</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical and Adaptive Scales</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-Esteem</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Self-Reliance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sensation Seeking</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Sense of Inadequacy</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Social Stress</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Socialization</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Content Scales</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anger Control</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Ego Strength</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Mania</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Test Anxiety</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Clinical Index</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Functional Impairment Index</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

SRP Content Scales and Clinical Index

<table>
<thead>
<tr>
<th>Scale Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anger Control</td>
<td>The tendency to become irritated and angry quickly and impulsively, coupled with an inability to regulate affect and control during such periods.</td>
</tr>
<tr>
<td>Ego Strength</td>
<td>The expression of a strong sense of one's identity and overall emotional competence, including feelings of self-awareness, self-acceptance, and perception of one's social support network.</td>
</tr>
<tr>
<td>Mania</td>
<td>The tendency to experience extended periods of heightened arousal, excessive activity (at times with an obsessive focus), and rapid idea generation without the presence of normal fatigue.</td>
</tr>
<tr>
<td>Test Anxiety</td>
<td>The tendency to experience irrational worry and fear of taking routine structured school tests of aptitude or academic skills regardless of the degree of preparation or study or confidence in one's knowledge of the content to be covered.</td>
</tr>
<tr>
<td>Functional Impairment Index</td>
<td>Indicates the level of difficulty an examinee has engaging in successful or appropriate behavior across a variety of interactions with others, performing age-appropriate tasks, regulating mood, and performing school-related tasks.</td>
</tr>
</tbody>
</table>
Interpreting the BASC-3

Do not interpret test data blindly

BASC-3 Scale & Composite Score Classification

<table>
<thead>
<tr>
<th>Classification</th>
<th>Adaptive Scales</th>
<th>Clinical Scales</th>
<th>T-Score Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very high</td>
<td>Clinically Significant</td>
<td>70 and Above</td>
<td></td>
</tr>
<tr>
<td>High</td>
<td>At-Risk</td>
<td>60-69</td>
<td></td>
</tr>
<tr>
<td>Average</td>
<td>Average</td>
<td>41-59</td>
<td></td>
</tr>
<tr>
<td>At-Risk</td>
<td>Low</td>
<td>31-40</td>
<td></td>
</tr>
<tr>
<td>Clinically Significant</td>
<td>Very Low</td>
<td>30 and below</td>
<td></td>
</tr>
</tbody>
</table>
Choosing the Right Norms
• BASC-3 Offers:
  – Same Gender Norms (male or female)
  – Combined Gender Norms (male + female)
  – ADHD Norms
  – General Clinical Norms

Choosing the Right Norms
• General National Norms
  – Does Rob have problems with depression relative to other children his age?
• Sex-based Norms
  – How does Michelle’s hyperactivity compare to that of other girls?
• Clinical Norms
  – How severe is Natalie’s psychoticism in comparison to other children diagnosed with mental health disorders of childhood, including ED’s?
• ADHD Norms
  – How severe are Kent’s symptoms of depression in comparison to other children diagnosed with ADHD

TRS, PRS, and SRP Validity Indexes
• F Index
• L Index (SRP)
• V Index (SPR)
• Consistency Index
• Number of Omitted/Unscorable Items
• Patterned Responses

Parent conference with elevations on Hyperactivity, Conduct Problems, and Aggression?
Always have something nice to say!! ☺️
### BASC-3 Administration and Reporting Options

**Hand-scoring administration/scoring**
- One record form to replace hand scoring, computer entry, and scanned forms.
- Separate worksheets for manual scoring.

**Digital Administration/Scoring**
- Pay per reports (Includes on-screen administration, scoring and reporting.)
- Unlimited Scoring Subscriptions (Includes scoring and reporting. Does not include on-screen administration.)

### Three Options

<table>
<thead>
<tr>
<th>Hand Scoring</th>
<th>Hybrid</th>
<th>All Digital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration: Paper</td>
<td>Administration: Paper</td>
<td>Administration: Q-global</td>
</tr>
<tr>
<td>Scoring &amp; Reporting: Paper – hand score</td>
<td>Scoring &amp; Reporting: Q-global unlimited subscription</td>
<td>Scoring &amp; Reporting: Q-global scoring</td>
</tr>
</tbody>
</table>

### What is Q-global?
- Q-global is a web-based system used to administer and score the TRS, PRS, SRP, SDH, and SOS forms.
- Digital Administration
  - On-Screen Administration (TRS, PRS, SRP)
  - Remote On-Screen Administration (TRS, PRS)
- Manual-Entry
  - Responses from paper forms can be entered into Q-global for online scoring and reporting.
  - Unlimited-Use Options

### BASC-3 Q-Global Report Features
- Validity Indexes
- Clinical, Adaptive, and Content Scales
- Clinical Probability Indexes
- Executive Functioning Indexes
- Clinical, Adaptive, and Content Scale Narratives
- Target Behaviors For Intervention
- Critical Items
- DSM-5 Diagnostic Considerations
- Items By Scale
- Item Responses

### DSM-5 Diagnostics Consideration Report
- Outcomes are aligned with DSM-5 to help support diagnostic efficiency

### Report Options for BASC-3 Q-Global

- Select Q-Global Report Features
  - Validity Index Narratives
  - Clinical Summary
  - DSM-5 Diagnostic Criteria

- Select Primary Diagnosis Groups
  - General Considered
  - General Disorder-Specific
  - Clinical Considered
  - Clinical Disorder-Specific
  - ADHD Considered
  - ADHD Disorder-Specific

- Select up to four additional report options for completeness
  - General Considered
  - General Disorder-Specific
  - Clinical Considered
  - Clinical Disorder-Specific
  - ADHD Considered
  - ADHD Disorder-Specific
Assign a new BASC-3 assessment

Select the Appropriate BASC-3 Rating Scale

Administering the BASC-3 on Q-global

Administering the BASC-3: Manual Entry

Administering the BASC-3: On-Screen Administration

Administering the BASC-3: Remote On-Screen Administration

On-Screen Administration allows the BASC-3 to be administered on web-enabled devices.
Remote On-Screen Administration: Sample Email

Assessment Invitation Email

[Image of email template]

Remote On-Screen Administration Email

Dear Jim,

You have been requested to complete the BASC 3-PR-S-Child for Barbara Sample-Gordon.

To complete the form, please click the following link:

Click here

NOTE: In some cases, select email clients may alter the link above, causing it to display an uncodable ("actual") link (e.g. part of the link is not underlined). Should you experience difficulties in accessing the form(s), ensure that the complete link text including any part of it that is not underlined - is displaying in the browser window.

Follow the directions on the screen. If you have any questions, please contact your Assessment Administrator (DO NOT REPLY TO THIS EMAIL).

Jared Lehner
mms@pearson.com

Regards,

Remote On-Screen Administration: Beginning the BASC-3

[Image of BASC-3 interface]

Remote On-Screen Administration: Raters are presented with Instructions

Instructions

This form contains phrases that describe how children may act. Please read each phrase and select the response that describes how this child has behaved recently (in the last several months).

Select Never if the behavior never occurs.
Select Sometimes if the behavior sometimes occurs.
Select Often if the behavior often occurs.
Select Almost always if the behavior almost always occurs.

Please mark every item. If you don't know or are unsure of your response to an item, give your best estimate. A "Never" response does not mean that the child "never" engages in a behavior, only that you have no knowledge of it occurring.

Click on >> to continue.

Remote On-Screen Administration: Missing Items

[Image of missing items prompt]

Missing Items

Sorry, you cannot continue until you correct the following:

• Issue 1: Please mark every item. If you don’t know or are unsure of your response to an item, give your best estimate.
Email notification for Clinician after BASC-3 is completed

Dear [Name],

Barbara Sample-Gordon has completed the assigned BASC-3 PRS-Child. The results are now available on Q-global.
- User ID: [ID]
You can login at
https://oa1.pearson.com/global/qglobal
We encourage you to bookmark this URL.

Regards,
[Signature]

This is an auto-generated email. Please do not reply to this email.

Generating Reports

Generating Reports (Cont.)

Generating Reports

- Examinee
- Group Administration
- Report

Advanced Examinee Search

Select an Examinee with reportable assessment records.

Include Sub-Accounts

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>System ID</td>
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<td>[Name]</td>
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<tr>
<td>First Name</td>
<td>[Name]</td>
</tr>
<tr>
<td>Examinee ID</td>
<td>[ID]</td>
</tr>
<tr>
<td>Birth Date</td>
<td>[Date]</td>
</tr>
<tr>
<td>Gender</td>
<td>[Gender]</td>
</tr>
</tbody>
</table>

BASC-3 Progress Report

- Available for use with the TRS, PRS and SRP.
Intervention Recommendations

- Includes detailed, effective Intervention Strategies
- Provides guidelines for preparing, implementing, and evaluating each intervention strategy.

ADDITIONAL BASC-3 COMPONENTS

- Student Observation System (SOS)
- Structured Developmental History (SDH)
- Parenting Relationship Questionnaire (PRQ),
- Behavioral and Emotional Screening System (BESS),
- BASC-3 Intervention Guide (BIG)
- BASC-3 Behavioral and Emotional Skill-Building Guide
- BASC-3 Flex Monitor

STUDENT OBSERVATION SYSTEM (SOS)

- Momentary Time Sampling
  - 3-second intervals, 30 seconds apart, for 15 minutes
- Digital administration through Q-global
  - Enables users to have all BASC-3 results in the same place
- Paper form is available and can be entered into Q-global
Student Observation System (cont.)

- Digital Administration: Smartphone or Tablet

Structured Developmental History

- Gathers information from a wide range of development areas and milestones.

<table>
<thead>
<tr>
<th>Parent/Age Questions</th>
<th>Child's Residence</th>
<th>Friendships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Information</td>
<td>Family Relations</td>
<td>Recreational Interests</td>
</tr>
<tr>
<td>Parents</td>
<td>Pregnancy</td>
<td>Behavior/Temporament</td>
</tr>
<tr>
<td>Primary Caregivers</td>
<td>Birth</td>
<td>Educational History</td>
</tr>
<tr>
<td>Child Care</td>
<td>Development</td>
<td>Additional Comments</td>
</tr>
<tr>
<td>Family History</td>
<td>Medical History</td>
<td></td>
</tr>
<tr>
<td>Brothers/Sisters</td>
<td>Family Health</td>
<td></td>
</tr>
</tbody>
</table>

Structured Developmental History (cont.)

- Dynamic Digital Assessment

  - Based on PRS scale scores
  - Content is automatically modified based on PRS elevations

PARENT RELATIONSHIP QUESTIONNAIRE (PRQ)
**Parenting Relationship Questionnaire (PRQ)**

- Assesses parent perspective of the relationship between the parent and his/her child.

**BASC-3 PRQ Rationale**

- Parent-child relationship influences:
  - academic outcomes
  - language development
  - readiness to learn
  - self-esteem
  - social competence
  - loneliness
  - Affect
- Helpful when implementing behavioral/emotional interventions that require any level of parental involvement.
- Useful in family counseling or other settings where it is important to assess parent/child relationship dynamics.

**BASC-3 PRQ Scales**

- Attachment
- Communication
- Discipline Practices
- Involvement
- Parenting Confidence
- Relational Frustration
- Satisfaction With School

**BASC-3 Behavior Intervention Guide**

- Comprehensive set of empirically-based interventions for a variety of behavioral and emotional problems.
- Organized around scales on BASC-3 TRS, PRS, and SRP forms
- Components include:
  - Behavior Intervention Guide (Paper and Digital)
  - Parent Tip Sheets
  - Documentation Checklist
  - Intervention Summary software report for TRS, PRS, and SRP

**BASC-3 Behavior Intervention Guide**

- 78 – Interventions across 11 of the most common problems of children and youth.
- Step-by step-procedures (prep – implement-evaluate)
- Considerations for practice and troubleshooting.
- Elementary and Secondary illustrations.
- Annotated bibliographies of research studies.
Behavioral and Emotional Skill-Building Guide

- Includes strategies for classroom and small-group use
- Groups may be conducted by guidance counselors, psychologists, social workers, interns, and other trained personnel
- Focus on building skills for all students, rather than individualized “interventions” that take too much teacher time

BASC-3 Flex Monitor: English and Spanish

- The BASC-3 Flex Monitor can be used to monitor behavioral and emotional functioning over a desired period of time
- A psychometrically sound way of developing customized behavior rating scales and self-report of personality forms
- Reliability data and standardized scores are obtainable for each unique form that is developed.

BASC-3 Flex Monitor

- Users have the ability to:
  - Choose an existing monitoring form.
  - Create a new, unique form using an item bank.
  - Choose a rater (Teacher, Parent, or Student).
  - Generate progress monitoring reports to evaluate change over time.

BASC-3 Flex Monitor – How will it work?

- Items can be filtered/searched.
- Users can compute the estimated reliability of the form, based on the standardization data sample.
- Reports include T-scores generated based on standardization samples
- Normative and Intra-individual comparisons
BASC-3 Behavioral and Emotional Screening System (BESS)

- Used for group-wide screening in schools (e.g., Tier 1 tool)
- Ensure we intervene early in high-risk students
  - Early intervention prevents the development of many ED's and thus, promotes successful schooling.
- Components include:
  - Q-global administration, scoring, and reporting
  - Manual
  - Record forms

How to: Universal Screening

- What time of year do you do Universal Screening?
- How often do you screen?
- Who is the best informant?
  - Parents? Teachers? Child?
- Do you need consent?
Additional BASC-3 Training Opportunities

• **Free Training webinars:**
  [www.pearsonclinical.com](http://www.pearsonclinical.com)

• **Online Introductory Training:**
  – Enter Code: newBASC3

MASP Conference Discount

• 10% off Promo Code
• Valid through November 22\textsuperscript{nd} – TZ3Z

Resources/Information

**Questions?**
Lynsey Psimas, PhD, NCSP
312-241-8406
[ Lynsey.Psimas@pearson.com](mailto:Lynsey.Psimas@pearson.com)

**More Information?**
[www.pearsonclinical.com/BASC-3](http://www.pearsonclinical.com/BASC-3)

**Customer Service**
[ ClinicalCustomerSupport@Pearson.com](mailto:ClinicalCustomerSupport@Pearson.com)
1-800-627-7271