# Draft Reading Difficulties Risk Screening Selection Panel Cover Sheet

Screening Instrument Title:

Organization:

Contact Name(s), Title(s), and Email(s):

## Information About Instrument

1. The instrument is recommended for use with the following grade(s):

2. The instrument is recommended for students speaking which language(s)?

3a. The following technology is required to implement the instrument. (Select all that apply)

[ ]  Computer or tablet

[ ]  Internet connection

[ ]  Other technology

3b. If *Other technology* is selected above, please describe the technology and how it is used.

4. If the instrument provides the option for multiple rounds of screening (i.e., universal screening with targeted follow-up screening), please briefly describe how many rounds of screening are offered, for which populations of students, and what is measured by each round of screening.

## Information About Administering Instrument

5. What is the mode of administration for the instrument, by grade level? (Select all that apply)

One-on-one

[ ]  Kindergarten

[ ]  First grade

[ ]  Second grade

Small group, n-size =

[ ]  Kindergarten

[ ]  First grade

[ ]  Second grade

Whole class/large group, n-size =

[ ]  Kindergarten

[ ]  First grade

[ ]  Second grade

Other, (please specify):

[ ]  Kindergarten

[ ]  First grade

[ ]  Second grade

6a. What is the average administration time in minutes (for full screening, or first round of screening)? Please specify time per unit (i.e., per student, per group).

6b. If subsequent rounds of screening are required, what is the additional average administration time in minutes? Please specify time per unit (i.e., per student, per group).

7. Please specify if scoring is done at the local (i.e. school or district) level, or if scoring is done by another entity. Are scores calculated manually, automatically (i.e., by computer), or via some other method?

8a. If scoring is done at the local level, what is the average scoring time in minutes (for full screening, or first round of screening) for each screening instrument?

8b. If scoring is done at the local level, and if subsequent rounds of screening are required, what is the additional average scoring time in minutes for each screening instrument in each subsequent round of screening?

9a. Who is expected to administer the instrument? Is training required to administer the instrument, and, if so, what type of training is available for instrument administrators?

9b. If applicable, what is the average amount of training time required for those that administer the instrument?

## Information About Training, Tools, and Supports

10. Please briefly describe which user interfaces and data management systems are available/required for entering and viewing scores, for users such as teachers, school and district leaders, and parents/guardians.

11. Please briefly describe if and how you use feedback from users of the instrument to engage in continuous improvement of the instrument and/or of user training and support products.

## Information About Costs

12. Describe the basic pricing plan/pricing structure for the instrument. Provide information on what is included in the published instrument, as well as what is not included, but required for implementation.

13a. What is the initial cost of implementing the instrument, on a per unit basis? If the cost is associated with a license, what is the cost of a license? Please include relevant information about license duration and number of screenings allowed per license, if applicable.

13b. If applicable, what is the replacement cost for subsequent use, on a per unit basis?

*Staff will insert instructions here for providing Panelists with access to screening instruments for review.*

California Department of Education, May 2024