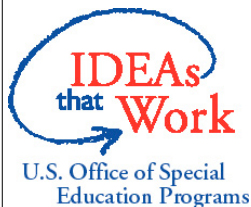


SLD Determination: What we know, don't know

Early Intervening Services (EIS) and Responsiveness to Intervention (RTI)



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Funded by U.S. Department of Education
Office of Special Education Programs
Renée Bradley, Project Officer - Award No. H324U010004
April 6, 2005



Brief Historical Review: OSEP LD Initiative

- Workgroup: parents, SEA & LEA practitioners, advocacy groups, and researchers (May 2000)
- Nine commissioned papers
- LD Summit (August 2001)
- Researcher Roundtable (November 2001)
- Finding Common Ground Roundtable
- Funding the National Research Center on Learning Disabilities (NRCLD)
- Work with six Regional Resource Centers (RRCs)

Bradley, R., Danielson, L., & Hallahan, D.P. (2002) *Identification of learning disabilities: Research to Practice*. New Jersey: Lawrence Erlbaum Associates



Purposes of NRCLD

- To understand how alternative approaches to disability identification affect who is identified
- To investigate state and local identification policies and practices and specific learning disabilities (SLD) prevalence
- To provide technical assistance and conduct dissemination to enhance state and local practice in identification
- To identify sites that effectively use RTI as a method of prevention and a tool for identification—an activity conducted with the Regional Resource Centers

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What is the LD problem?

- Too many students
- Minority over/under representation
- Identification requires students to fail
- Confounding of different high-incidence disabilities
- Over-generalized concept to low achievers
- Cost in assessment and services
- Identification occurs too late

What is the LD problem?

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Slippery policy path: Special education in general education



“The 1997 amendments to IDEA have created a new policy environment which confuses the focus on *each* child needing special education with the aphorism of educating *all* children associated with educational reform.”

Kaufman & Lewis, 1999

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Early Intervening Services and IDEA Reauthorization (P.L. 108-446)

New language in IDEA:

“A local educational agency (LEA) may not use more than 15% of the amount such agency receives under this part (Part B)... to develop and implement coordinated, early intervening services ...

for students in kindergarten through grade 12 (with particular emphasis on students in kindergarten through grade 3) who do not meet the definition of a child with a disability...

but who need additional academic and behavioral support to succeed in a general education environment.”

Sec. 613(f)(1)



SLD Determination and IDEA 2004 (P.L. 108-446)

New language in IDEA:

“... a local educational agency may use a process that determines if the child responds to scientific, research-based intervention as a part of the evaluation procedures....”

Sec. 614(b)6B

- The language of IDEA 2004 does not specifically use the term “responsiveness to intervention (RTI).”
- In the special education research literature, the process mentioned in this language is generally considered as referring to responsiveness to intervention (RTI).
- RTI is not mandated (e.g., “. . . a local agency *may* use a process. . .”).

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EIS & RTI comparisons

1. Both EIS and RTI have a significant involvement of general education
2. EIS has a funding source (special education); RTI does not
3. EIS and RTI emphasize the use of scientifically based interventions; not “home grown”
4. EIS is **mandated** for districts that have disproportionate over-representation of students with disabilities or of minorities with disabilities.
5. Under EIS, the LEA must annually report on students served; RTI does not have such a provision.
6. EIS is not linked with SLD determination procedures. RTI, on the other hand, is.
7. RTI is conceptualized as important to all students. EIS is focused as support services (which could be in an RTI tier).



Assessing students' response to scientific, research-based intervention



Earlier Models

1. Appropriate learning experiences (e.g., KY)
2. Pre-referral team
3. Teacher assistance teams (TAT)
4. Diagnostic teaching models
5. Learning potential models

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Why RTI?

- RTI can be *one* component of SLD determination
- As a **school-wide reform**, intends appropriate learning experiences for *all* students
- Provides school-wide, class level and individual student view of curriculum and instructional effectiveness
- Promotes early identification of students at risk for academic failure
- Involves multiple performance measures (rather than measurement at a single point in time)

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Research Elements of RTI

- Three applications:
 - Prevent academic problems through early ID
 - Intervene with low performing students
 - Assist in identifying students with SLD
- Implementation of a scientifically-based, differentiated curriculum with different instructional methods
- Two or more tiers of increasingly *intense* scientific, research-based interventions (*Intensity* dimensions include intervention specificity, duration, frequency and time of interventions, group size, and instructor skill level)
- Individual problem solving model or **standardized intervention protocol** for intervention tiers
- Explicit decision rules for assessing learners' progress (e.g., level and/or rate)

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What Characterizes RTI Implementation?

1. Students receive high-quality, research-based instruction by qualified staff in their *general education* setting (Tier 1)
2. *General education* instructors and staff assume an active role in students' assessment in that curriculum (screening & progress monitoring)
3. *General education* staff conduct universal screening of (a) academics, and (b) behavior ($\geq$ 1/yr)
4. School staff implement specific, research-based interventions to address the students' difficulties (Tier 2)

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What Characterizes RTI Implementation?

(continued)

5. School staff conducts continuous progress monitoring of student performance (e.g., weekly or biweekly) for Tier 2 and 3 interventions, less frequently in general education
6. School staff use progress monitoring data and explicit decision rules to determine interventions' effectiveness and needed modifications
7. Systematic assessment is made of the fidelity or integrity with which instruction and interventions are implemented
8. Referral for comprehensive evaluation; FAPE; due process protections

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NRCLD Goal 4

Phase 1

1. Determine whether/how an RTI model is being implemented
2. Clarify whether/how an RTI model is used to determine LD eligibility

Phase 2

3. Establish whether/how an RTI model is an effective prevention system
4. Validate whether/how an RTI model enhances LD identification

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RTI Features of Focus

1. School-wide screening (measures, frequency, & cut score)
2. Tiered levels of reading intervention
3. Progress monitoring/tiers (measures, frequency)
4. Delineation of cut scores for responsiveness
5. Use of *student* data in decision-making
6. Substantiated learner outcomes (school wide)

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Phase 1 Nominations

# of Tiers	# of Apps	%
2	11	27%
3	18	44%
4	10	24%
5	2	5%
Total	41	100%

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Site common characteristics

1. Multiple year investment
2. “We’re not there yet.”
3. Student-level problem-solving framework
4. Not standard intervention protocols in Tier 2
5. Parental notification procedures and engagement

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Distinguishing Research-based & School-based Implementation

Research markedly different than school examples:

1. Confusion of distinguishing “screening” and “progress monitoring”
2. Lack of scientific basis in Tier 2 intervention (e.g., more of the same)
3. Limited rule based decision-making (e.g., *flexible* cut scores)
4. Frequency of progress monitoring data collection
5. (Consistent) data informs decisions but other factors have stronger influence
6. Performance dominates; not slope (growth rate)
7. Lack of fidelity measures in the individual or small group interventions
8. Significant difference in “hot-house” sites from the “home-grown” sites.
9. Theory of practice: For schools, the issue is about getting services to students, not disability determination

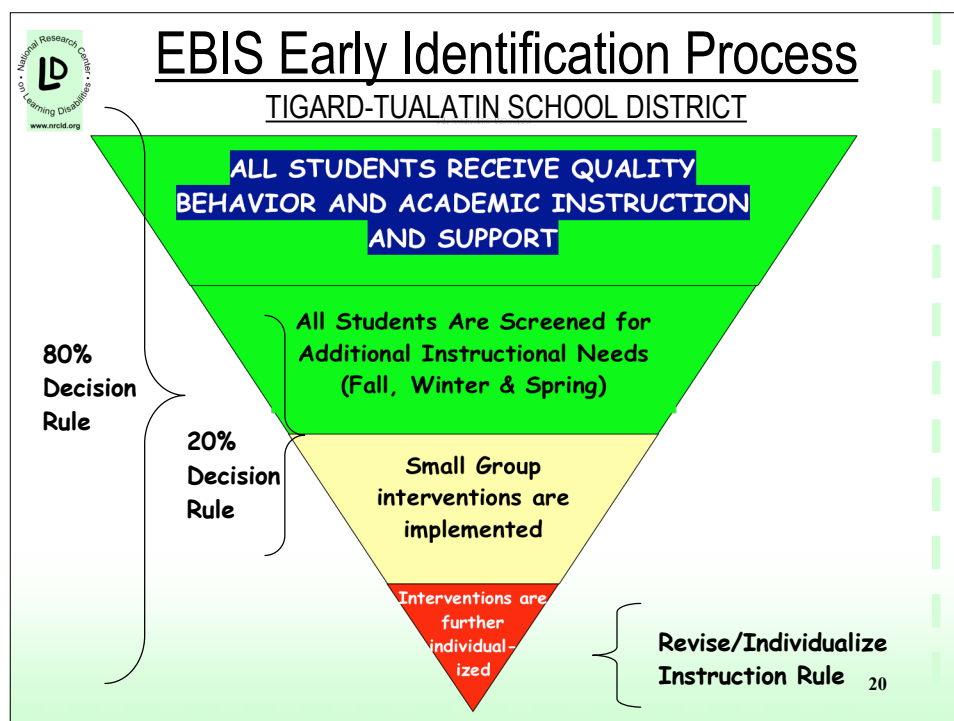
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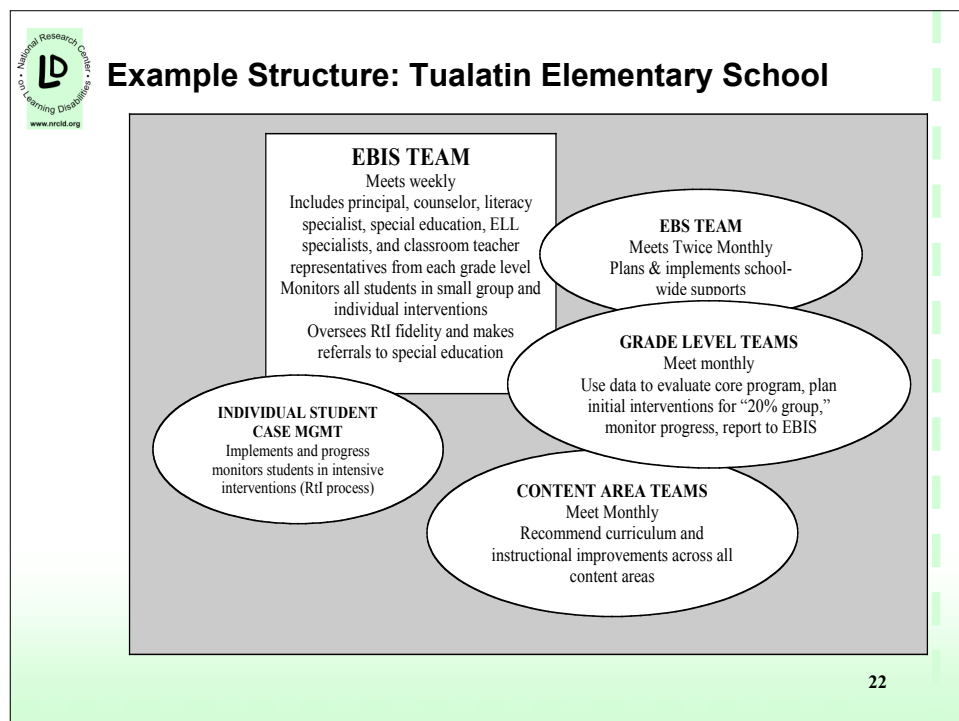
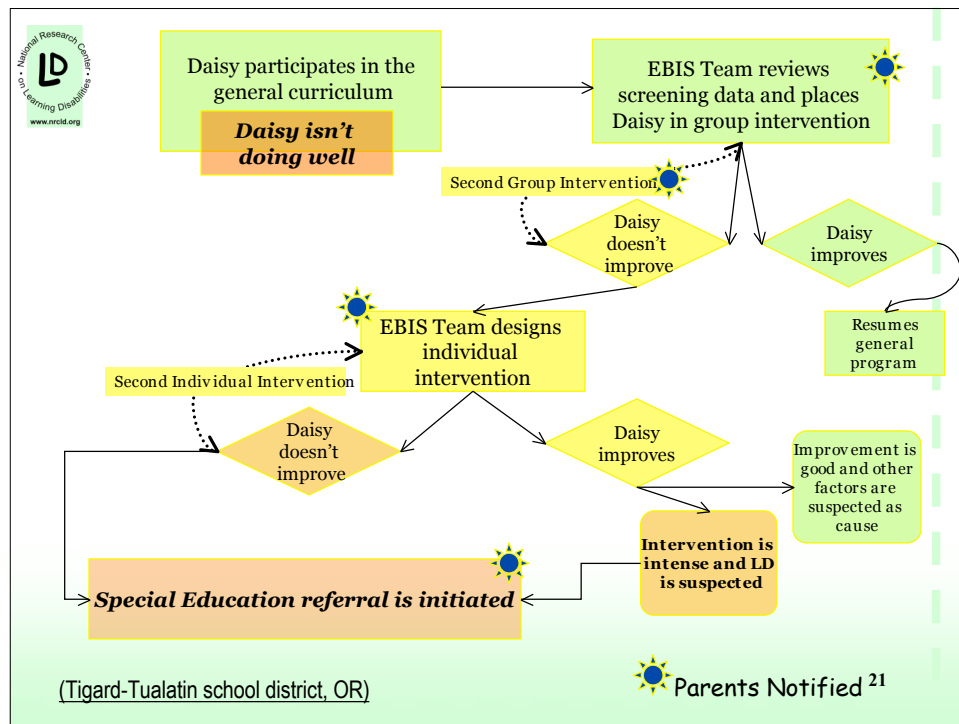


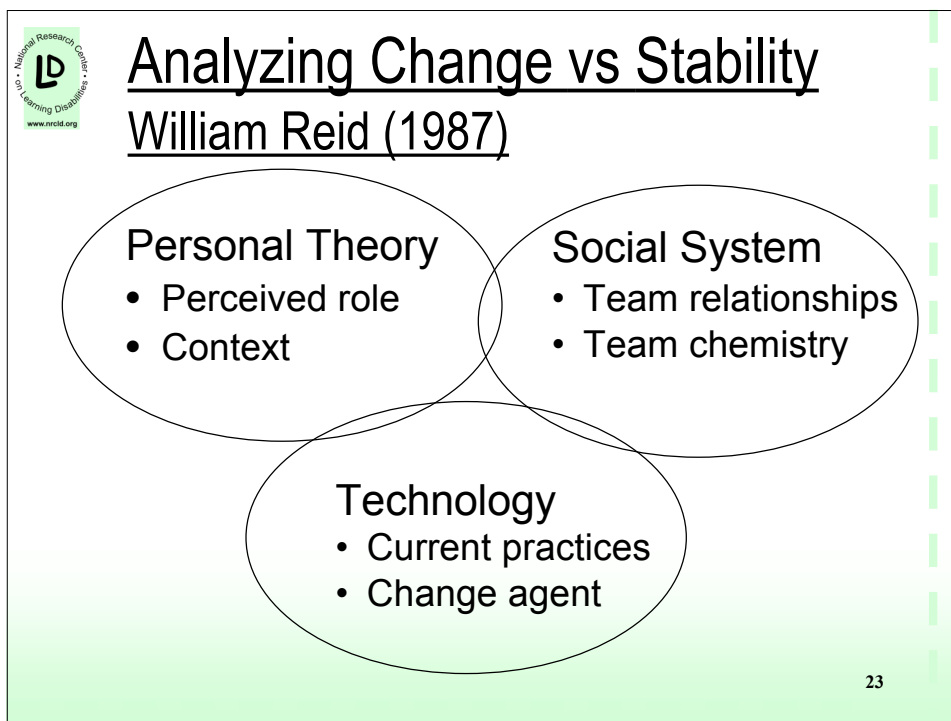
Enabling features with greatest consistency (rank ordered)

1. Commitment to the view of using student level data
2. Administrative leadership
3. Professional development
4. Strong Tier 1 core reading (supplemented with other materials and staff)
5. Reading screening measures

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Thank you!

Check our website:
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