

RTI for Identification of SLD; Early Intervening Services (Part 2)

Daryl F. Mellard January 30-31, 2007

National Research Center on Learning Disabilities
A collaboration of Vanderbilt University
and the University of Kansas
Funded by U.S. Department of Education
Office of Special Education Programs,
Judy Shanley, Project Officer

Funding for NRCLD is provided by the U.S. Department of Education, Office of Special Education Programs. Award No. H324U010004



Project Staff

Vanderbilt University

- Doug Fuchs, Co-Director & Principal Investigator
- Dan Reschly, Co-Director & Principal Investigator
- Lynn Fuchs, Principal Investigator
- Don Compton, Principal Investigator
- Joan Bryant, Project Coordinator

University of Kansas

- Don Deshler, Co-Director & Principal Investigator
- Daryl Mellard, Principal Investigator
- Julie Tollefson, Dissemination Coordinator
- Melinda McKnight & Barb Starrett, Research Assistants
- David Gnojck, Graphics and Design
- Evelyn Johnson, Product Development



Regional Resource Centers

- Federal Resource Center
 - Rex Shipp
- Region 1: Northeast
 - Kristin Reedy, Director
 - · Rich Reid, Representative
- Region 2: Mid-South
 - Ken Warlick, Director
 - Kathy Chapman, Representative
 - Nancy Sander, Representative
- Region 3: Southeast
 - · Elizabeth Beal, Director
 - Larry Martin, Representative

- Region 4: North Central
 - Michael Sharpe, Director
 - John Heskett, Representative
- Region 5: Mountain Plains
 - John Copenhaver, Co-Director
 - Carol Massanari, Codirector/Representative
- Region 6: Western
 - · Caroline Moore, Director
 - Brad Lenhardt, Representative



Purposes of the NRCLD

- To understand how alternative approaches to identification affect who is identified.
- To investigate state and local identification policies and practices and LD prevalence.
- To provide technical assistance and conduct dissemination to enhance state and local practice in identification.
- To identify sites that effectively use responsiveness-to-intervention as a method of identification.





What are today's RTI related learner outcomes?

- 1. Components of RTI: What's included?
- 2. Uses of RTI: What decisions are made?
- 3. Connecting RTI and EIS
- 4. NRCLD offerings for you
- 5. SEA implementation lessons
- 6. Local implementation lessons



Across Methods: "Signature" Characteristic of SLD

Unexpected and **Specific** Learning Failure

The child with <u>unexpected</u> learning failure (or underachievement) is perceived by parents and teachers as generally competent. The learning difficulty is surprising and puzzling.

<u>Specific</u> learning failure suggests neurological dysfunction and processing deficits, which are presumed to cause severe problems in reading, writing, or math.

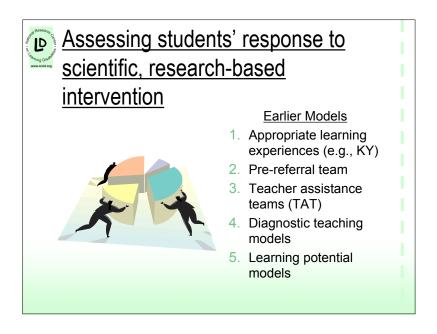


Defining SLD in Terms of RTI

SLD as nonresponders to validated instruction.

Assumption: If a child does not respond to instruction that is effective for the vast majority of children, then something is different about the child causing the nonresponse.

RTI eliminates poor instructional quality as a viable explanation for learning difficulty.





Why RTI?

- RTI can be one component of SLD determination
- As a school-wide reform, intends appropriate learning experiences for all students
 - Promotes early identification of students at risk for academic failure
 - Involves multiple performance measures (rather than measurement at a single point in time) linking assessment and instruction
 - Provides timely, school-wide, class level and individual student view of curriculum and instructional effectiveness; not a wait-to-fail model



Views on RTI applications

Distinct Uses

- Prevention (kdg & early 1st grade) (e.g., McMaster et al., O'Connor et al., Torgesen et al., Vaughn et al, Vellutino et al.)
- Intervention for students with achievement or behavior problems
- 3. As a component of SLD determination (e.g., Fuchs et al.; Speece et al.)

Genesis

- School-wide reform
- Public health applied to education
 - Prediction
 - · Inoculation, and
 - Tiered intervention
- Necessary for disability determination
- Shifting roles and responsibilities



Approaches to Implementing RTI

Along Five Dimensions

- 1. Number of layers of preventative services (2-5)
- 2. Nature of secondary preventative treatment
 - Individualized (i.e., problem solving)
 - Standardized research-based protocol
- 3. How at-risk students are identified
 - Cut-point on screening test
 - With/out short-term progress monitoring
- 4. How "response" is defined
 - Final status on norm-referenced test or using a benchmark
 - Pre-post improvement
 - CBM Slope and Final Status
- 5. What happens to nonresponders
 - Nature of special education (tertiary prevention)



RTI: Three Layers of Preventative Services

(possible to have > 1 tier within each layer)

- Primary Prevention
 - General education
 - Research-based program
 - · Faithfully implemented
 - · Works for vast majority of students
 - Screening for at-risk pupils, with weekly monitoring of atrisk response to general education
- Secondary Prevention
 - · Small-group, validated preventative tutoring
- Tertiary Prevention
 - Special education



Research Components of RTI

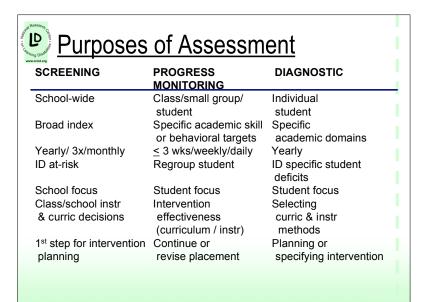


Commonly included:

- School-wide screening
- Progress monitoring
- Tiered interventions
- Fidelity of intervention measures (treatment integrity)

Selectively included:

- Parent involvement
- Link to IDEA procedural safeguards





A Primer: Curriculum-Based Measurement (CBM)

- Teachers assess students' academic performance, using brief measures.
- Each alternate form of the CBM test assesses performance on a measure of what is expected by end of year.
- The CBM score is viewed as an indicator of overall performance.
- Major RTI purposes
 - To designate risk (measured on 1 occasion near beginning of the year)
 - To describe rate of response to instruction (measured weekly on alternate forms, with a slope of improvement calculated)



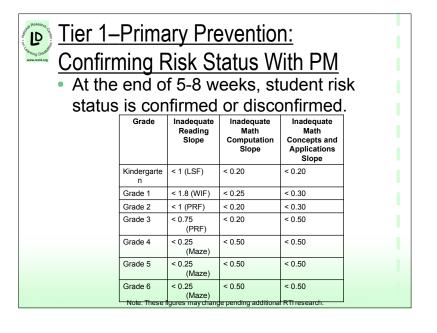
Popular CBM Indicators of **Reading Competence**

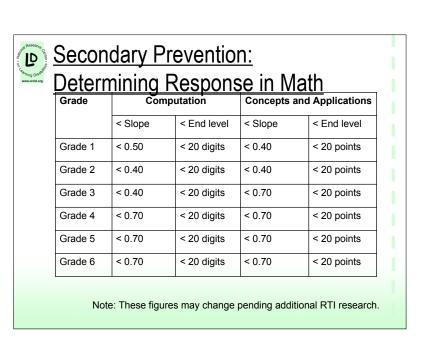
- Kindergarten: Letter-Sound Fluency
- Grade 1: Word-Identification Fluency
- Passage Reading • Grades 2-3: Fluency
- Grades 4-6: Maze Fluency



Screening for Possible Reading Risk

CBM Probe	Cut-off
Letter Sound Fluency	< 10 letters/minute
Word Identification Fluency	< 15 words on list/minute
Passage Reading Fluency	< 15 words in text/minute
Passage Reading Fluency	< 50 words in text/minute
Maze Fluency	< 10 Maze replacements/ 2.5 minutes
Maze Fluency	< 15 Maze replacements/ 2.5 minutes
Maze Fluency	< 20 Maze replacements/ 2.5 minutes
	Letter Sound Fluency Word Identification Fluency Passage Reading Fluency Passage Reading Fluency Maze Fluency Maze Fluency



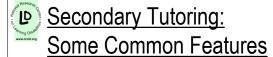




Tier Considerations

(Use in #1 prevention and #2 intervention)

- Decision rules for repeating tiers
- Number of interventions required
- Distinguish curricular, instructional, and combined interventions. What will you require?
- Fidelity (integrity) of intervention measures:
 When does an intervention delivery lack integrity? What happens next?
- Dosage question: How do we match the strength of the intervention (intensity) to student needs?



Small Groups (1:1, 1:3, 1:5, 1:10)

- 10-12 wks, 3-4x per wk, 35-45 min per session
- Point system for motivation
- Immediate corrective feedback
- · Mastery of content before moving on
- More time on difficult activities
- · More opportunities to respond
- Shorter transitions
- · Goal setting and self monitoring
- Special relationship with tutor



Distinguishing among Tiers: Specificity and Intensity

- 1. Size of the instructional group
- 2. Immediacy of corrective feedback
- 3. Mastery requirements of content
- 4. Amount of time on difficult activities
- 5. Number of response opportunities
- 6. Number of transitions among contents or classes

- 7. Specificity and focus of curricular goals
- 8. Duration of the intervention (weeks)
- 9. Frequency with which the intervention is delivered in a day or week
- 10. Amount of time focusing on the intervention (minutes)
- 11. Instructor's skill level



RTI Dimension #2: Standardized Research-Based Secondary Preventative Treatment

Tutoring

Small groups (2-4)

3-4 sessions per week (30-45 min per session)

Conducted by trained and supervised personnel (typically, not the classroom teacher)

In or out of classroom

10-30 weeks



Nature of Tier 3 Special Education

- Reform special education so it represents a viable and important tier within the multitiered prevention system
 - Individualized programs formulated inductively using CBM
 - Intensive instruction conducted individually for sufficient duration to be effective
 - Criteria specified and monitored to exist students so that placement is flexible and used only as required



Fidelity of Implementation Component

- Treatment integrity: Accuracy and consistency
- Promote as an affirming professional development activity "we want to do the best we can"
- School interventions teacher level
- Three dimensions of fidelity checks:
 - Method: How?
 - Frequency: How often?
 - · Support system: So what's next?
 - · Professional development
 - · Resource allocation



RTI as a SLD Determination Component

- Assessment information for decision making about special education (disability and need) status
- Should be the highest standard of implementation
- Standard intervention protocol (8 week)
- · High frequency of progress monitoring
- Explicit decision rules (e.g., final status or slope)
- High degree of treatment integrity
- RTI is one component; an initial threshold



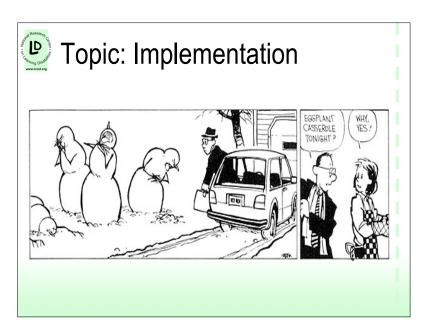
Within RTI Identification

- Secondary preventative tutoring is viewed as the "test" to which at-risk students respond to determine disability.
- That response needs to be measured and categorized as "responsive" (not LD) or "unresponsive" (LD) using an appropriate tool for such measurement.



EIS & RTI comparisons

- 1. EIS and RTI emphasize scientifically based interventions; not "home grown"
- 2. EIS is mandated for districts with disproportionate representation of students in disability groups or minorities with disabilities.
- 3. Under EIS, the LEA must annually report on students served; RTI does not have such a provision.
- 4. EIS is not linked with SLD determination procedures. RTI, on the other hand, is.
- 5. RTI is conceptualized as school-wide. EIS is focused as support services.





Distinguishing Research-based & School-based Implementation

Research markedly different than school examples:

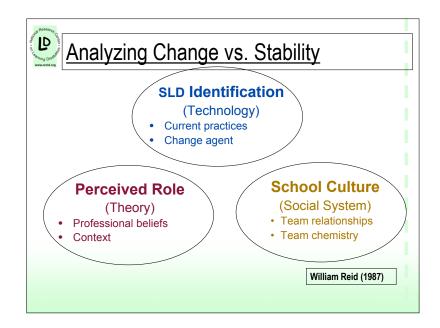
- Confusion of distinguishing "screening" and "progress monitoring"
- Lack of scientific basis in Tier 2 intervention (e.g., more of the
- Limited rule based decision-making (e.g., flexible cut scores)
- Frequency of progress monitoring data collection
- (Consistent) data informs decisions but other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



Frequently Asked Questions

What will be required for professional development?

- Staff need to learn to:
 - · Collect and interpret screening scores
 - Ensure quality of primary prevention
 - · Collect and interpret on-going progress-monitoring data
 - · Design secondary prevention programs with validated interventions
 - · Implement secondary prevention programs with fidelity

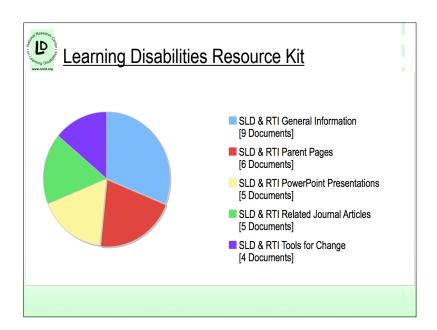


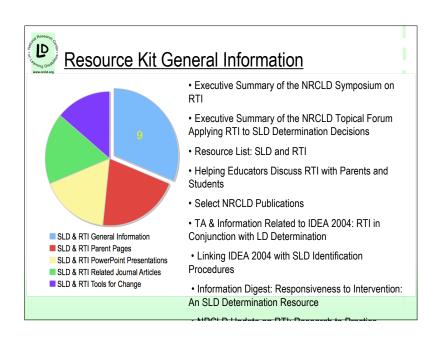


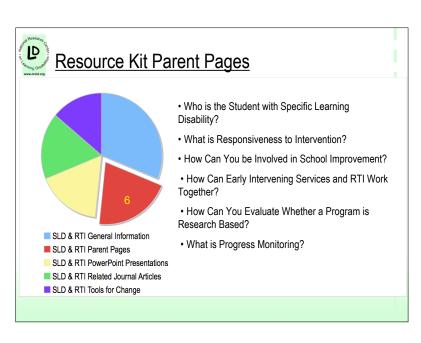


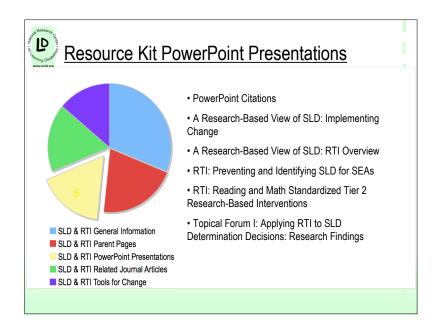
Survey: Your thoughts please

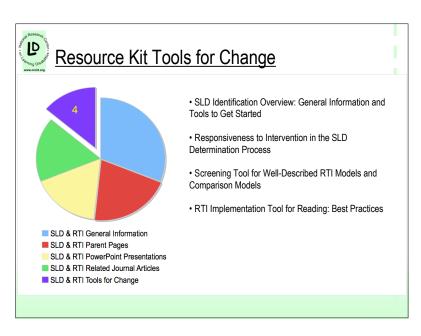
- Help us focus our efforts to help you
- What are your most pressing needs in the next six months?
- How is assistance best offered?
- Would a workshop on focused topics be helpful?













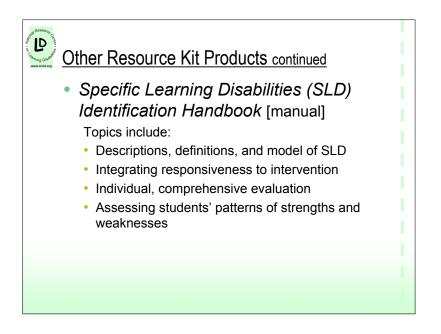
Other Resource Kit Products

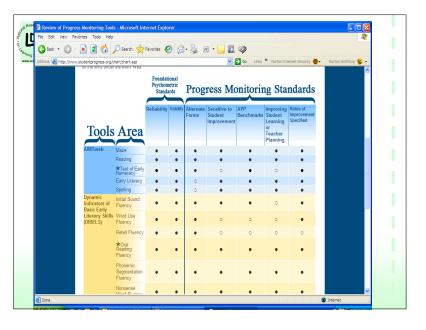
- Getting Started with SLD Determination: After IDEA Reauthorization [manual]
 - Introduction
 - Section 1: Determine the current status in your state and prepare for change
 - Section 2: Ensure policy coherence across legislation
 - Section 3: Address challenges with SLD determination in your state
 - Section 4: Address who is the student with SLD
 - Section 5: Design your plan
 - Section 6: Implement your plan
 - · Section 7: Evaluate your plan



Other Resource Kit Products continued

- Responsiveness to Intervention (RTI): How to Do It [manual]
 - Introduction
 - · Section 1: School-wide screening
 - Section 2: Progress monitoring
 - Section 3: A tiered service delivery model
 - Section 4: Fidelity of implementation
 - Section 5: Implementation site examples and student case studies
 - Conclusion







For Information about Progress Monitoring Total Monitoring, Training & Research

- National Center for Student Progress Monitoring
 - www.studentprogress.org
 - studentprogress@air.org
- National Research Center on Learning Disabilities
 - www.nrcld.org



Thank You

Daryl Mellard DMellard@ku.edu 785-864-7081

