

Presenter's Guide

Response to Intervention and SLD Identification



Acknowledgements

The IDEA Partnership wishes to acknowledge the work of Lou Danielson, Ph.D., Director, Research to Practice Division, Office of Special Education Programs; Dr. Daryl Mellard, Director, National Research Center on Learning Disabilities (NRCLD), University of Kansas; and Dr. Douglas Fuchs, Director, National Research Center on Learning Disabilities (NRCLD), Vanderbilt University.

Slides displaying the National Research Center on Learning Disabilities (NRCLD) logo contain original text presented by Dr. Lou Danielson on June 21, 2006 to the members of the IDEA Partnership Focus Group and/or Dr. Daryl Mellard on April 1, 2005 to the members of the National Association of School Psychologists (NASP).

-and-

We are deeply grateful for being allowed to adapt the original presentations in order to provide additional access to all education stakeholders.

The following stakeholder groups within the IDEA Partnership were represented by individuals who worked together, both on-site in Washington, DC and electronically from across the country, to create this presenter's guide. The purpose of this guide and the complementary Power Point presentation is to make information more accessible to all interested stakeholders.

Role: Educational Consultant
Location: Florida

Role: Role: School Psychologist
Location: Maryland

Role: School Social Worker
Location: Ohio

Role: Policymaker
Location: Virginia

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Purpose of this guide:

This presenter's guide is intended to support the PowerPoint slides by offering

- Suggested background readings;
- Talking points relative to each slide;
- Suggested activities to enhance learning opportunities for participants;
- Tips to facilitate the professional growth experience; and
- Suggested readings for extension of learning.

About the format:

There are three distinct sections of this document, "Preparation", "Presentation/Process", and "Supplementary Materials".

The **preparation** section begins on the following page and includes:

- Participant objectives;
- Three suggested agenda/timeframes to help you meet the needs of the audience and/or available time allotment;
- Support/background materials the presenter may wish to access prior to preparation for presentation;
- Materials and supplies needed for the presentation; and
- Equipment needed for the presentation.

The **presentation/process** section follows preparation suggestions and includes:

- Suggested minutes for information sharing and/or suggested activities for each of the key concepts of the presentation, within each section minutes are enclosed in boxes and intended to be highlighted ahead of time dependent on the overall timeframe selected for the presentation;
- Slides in miniature, in sequential order, with talking points,
 - Usually in bulleted format, not intended to be read verbatim, and
 - Presenter is encouraged to interject his/her own style;
- Participant activities to enhance learning opportunities, indicated by a vertical line to the left of each activity,
 - May be carried out as suggested, or
 - Adjusted to audience and time allotment;
- Presenter notes to suggest background information or extension readings, noted in bold italic font;
- Presenter tips to suggest facilitation techniques, noted in bold italic font; and
- Suggested segue comments to bridge between ideas and/or activities, also noted in bold italic font.

The **supplementary materials** section contains handouts that may be copied and used to support or enhance the presentation.

Response to Intervention *Preparation*

An important goal of this guide is to support the presenter in connecting the ideas in the presentation to practices at the state, local district, and building levels. This presentation has in-depth level content and is intended to assist audience participants with a deeper knowledge and understanding of a response to intervention process and how data generated through an RTI process can lead to effective practices for the identification of students with specific learning disabilities.

Objectives:

Participants will increase knowledge of

- RTI definition and terminology.
- Specific Learning Disability identification issues.

Participants will explore

- Elements of RTI in practice.
- RTI data practices that lead to useful information SLD determination.

Participants will acquire reference to quality resources that expand learning and support local or state actions relative to RTI.

Agenda/Timing:

5.75 hours - Total time for information sharing and learning activities

4.25 hours - Total time for sharing of information and abbreviated activities

2.5 hours - Total time for sharing of information and Q&A

5.75 hours - Total time for presentation of information and learning activities;
additional time is needed for appropriate breaks

Suggested time allotments:

5 min	Introduction
10 min	Definition
55 min	Goals of Response to Intervention
	Break
125 min	Response to Intervention in Practice
	Break
35 min	Advantages of Response to Intervention
40 min	Issues with Current SLD Identification
	Break
50 min	RTI as part of SLD Identification
20 min	Resources for Further Consideration
5 min	Summary Statements

4.25 hours - Total time for presentation of information and abbreviated activities;
additional time is needed for appropriate breaks

Suggested time allotments:

5 min	Introduction
10 min	Definition
35 min	Goals of Response to Intervention
105 min	Response to Intervention in Practice
	Break
15 min	Advantages of Response to Intervention
35 min	Issues with Current SLD Identification
35 min	RTI as part of SLD Identification
10 min	Resources for Further Consideration
5 min	Summary Statements

2.5 hours - Total time for presentation of information and Q&A

Suggested time allotments:

5 min	Introduction
10 min	Definition
10 min	Goals of Response to Intervention
45 min	Response to Intervention in Practice
5 min	Advantages of Response to Intervention
30 min	Issues with Current SLD Identification
20 min	RTI as part of SLD Identification
10 min	Resources for Further Consideration
5 min	Summary Statements
10 min	Reflections, Questions, Discussion

Support Materials:

National Research Center on Learning Disabilities: www.nrcld.org
Responsiveness-to-Intervention Evaluation, Technical Assistance, and
Dissemination Activities

The IDEA Partnership Website: www.ideapartnership.org

A Partnership Collection on RTI

Many Journals, Many Voices

Results for Kids: Resources

Materials and Supplies:

PowerPoint slides - or - Overheads prepared from the PowerPoint slides

Handout Masters – to be copied in appropriate numbers

Chart paper and markers

Paper and pencils for participants

Equipment:

Computer and projector -or-

Overhead projector

Projection screen

Response to Intervention Presentation/Process

Introduction:

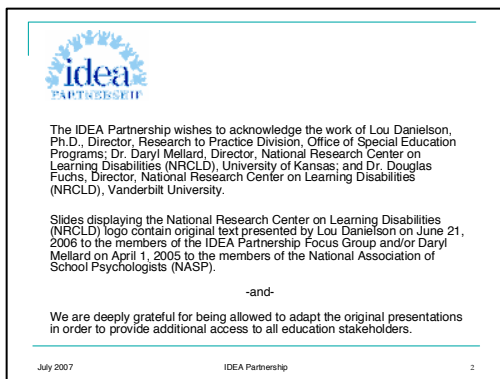
5 minutes
5 minutes
5 minutes

Response to Intervention is a term creating and receiving much attention in the field of education today.



Presenter Tip: The introduction should be very brief and gain interest immediately. The following is a starting point; adapt for the particular audience.

Throughout our time together today we will explore the fundamentals of the RTI concept/process and the relationship of the process to supporting identification of students with specific learning disabilities.



Presenter Note: The original PowerPoint presentations made by Lou Danielson, Ph.D., Director, Research to Practice Division, Office of Special Education Programs to the IDEA Partnership; Dr. Daryl Mellard, Director, National Research Center on Learning Disabilities (NRCLD), University of Kansas to the National Association of School Psychologists; and Dr. Douglas Fuchs, Director, National Research Center on Learning Disabilities (NRCLD), Vanderbilt University to the Council for Exceptional Children. The originals were adapted by a cross-stakeholder group of persons representing administrators, practitioners

(teachers and related service personnel), and policymakers and is provided through the efforts of the IDEA Partnership.

Segue: How can a response to intervention (RTI) process lead to and support the determination of eligibility for a student with a specific learning disability (SLD)? This is a critical question for many locals and states as RTI is being explored and implemented throughout the country. Our agenda for the day includes definition of response to intervention as a process, what that process might look like in practice, and the relationship of RTI data to SLD determination.

Session Overview

- RTI Process
 - What is it?
 - What might it look like in practice?
- SLD Identification
 - What are the current issues/problems?
 - What data can RTI yield that will assist in SLD determination?
- Resources for further consideration

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Presenter Tip: The agenda slide is presented as an adult learner organizer tool and should not be omitted. The presenter may wish to configure the bullets to come in one at a time and give the participants a sentence or two about each as a preview of what is to come.

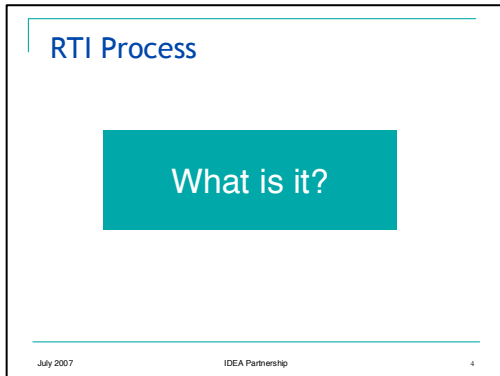
Ideas for expanding on the bullets:

- RTI process
 - What is it? -- We will define Response to Intervention from a practical standpoint; considering transformation of current practice based research and what we now know about children and learning.
 - What might it look like in practice? -- From sites where RTI has been implemented, we know key components that must be in place for the process to be effective.
- Specific Learning Disability (SLD) Identification
 - What are the current issues/problems? – We are all aware that the greatest percentage of students with IEPs are classified as having learning disabilities may be labeled incorrectly; we will explore some of the underlying issues together.
 - What data can RTI yield that will assist in SLD determination? – If there are current problems with identification systems, what must be considered as a new system.
- Resources for further consideration
 - It is impossible to develop a plan for implementation in one day; after our discussions, we will want to explore additional resources to assist us in our decision-making.

Definition:

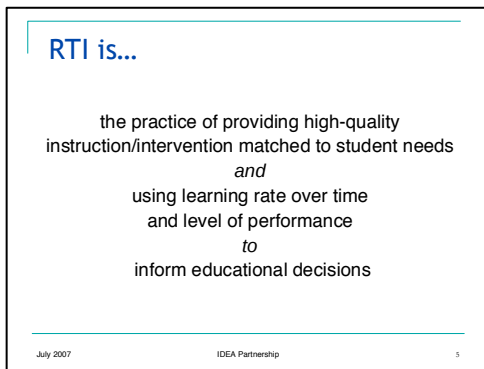
10 minutes
10 minutes
10 minutes

Segue: Let us begin at the beginning, with a definition.



Presenter Note: This introductory slide is included here to set the stage for the first segment of the presentation. Similar slides are located throughout for each of the other big ideas in this presentation. These slides may be omitted for shorter presentation times.

What is Response to Intervention?



Presenter Note: There are several definitions of the RTI process in the literature. This definition represents one view. It is important for users to understand that RTI is a “process” vs. a model for practice as there are many variations of this process using its basic components. Regardless of the differences in actual implementation, the defining elements presented on this slide and the components of the process described in the next several slides are unifying concepts of effective processes.

Ideas for sharing with the participants:

- The definition is being used throughout the IDEA Partnership materials
- Created based on
 - National Association of State Directors of Special Education (NASDSE) *Response to Intervention: Policy Considerations and Implementation* document

- Various National Research Center on Learning Disabilities (NRCLD) documents
- Conversations and discussions held at national IDEA Partnership meetings over the past several years
- It is noted that RTI is
 - High quality instruction -- defined as “scientifically research-based” and taught with fidelity; thus, giving us confidence that it will be effective with a majority of students
 - Matched to student needs – directly assessing student skills
 - Learning rate over time – provides information about how well instruction is working for individual students or small groups of students over time
 - Level of performance - snapshot of how well a student is progressing compared to other students (or district/state standards)
 - Educational decisions include:
 - Is our instruction working?
 - If so, is the student catching up to his/her peers?
 - If not, how do we need to change it?
 - How far behind is a student?
 - What resources are needed?
 - What types of interventions and levels of intensity are necessary?
 - RTI data can also constitute PART of the data needed for a full, individualized evaluation under IDEA

In his April 2005 presentation to the National Association of School Psychologists, Dr. Daryl Mellard, Director of the National Research Center on Learning Disabilities at the University of Kansas, expanded on what RTI is.

LD

What do we mean by RTI?

1. RTI has two goals: prevent academic problems and determine students with LD.
2. 2 or more tiers of increasingly intense interventions.
3. Use a problem solving model or standardized treatment protocol for intervention tiers.
4. Implementation of a differentiated curriculum with different instructional methods.
5. Varied duration, frequency, and time of interventions, and
6. Explicit decision rules for judging learners' progress.

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Presenter Note: This particular slide provides the structure and organization for the content throughout this presentation.

Presenter Tip: For the shorter presentation you may want to introduce this slide and paraphrase the six numbered items, then move on. Each will be expanded upon within the presentation as it proceeds. For the longer presentation you may wish to expand on some or all of the bullets using the notes provided below.

Ideas for sharing with the participants:

- RTI has two goals
 - Prevent academic problems -- many districts are also focusing on the prevention of behavior problems using a response to intervention process, thus reducing the number of discipline referrals; these districts are citing a direct correlation between increased positive behavior and increased academic achievement
 - Determine students with LD – While the data collected through an RTI process may be used as part of the data to determine eligibility for a student with a specific learning disability, It is important to note that participation in the RTI process only is not sufficient for determination.
 - 2 or more tiers of increasingly intense interventions – instructional interventions are based on student need
 - Use of a problem solving model or standard treatment protocol – as interventions are selected it is important to look at the evidence to determine which intervention has the greatest potential to result in student success
 - Implementation of a differentiated curriculum – to meet the diverse needs of today’s diverse student population
 - Varied duration, frequency, and time of interventions – based on research relevant to a particular intervention, and based on the demonstrated needs of the student
 - Explicit decision rules – responsiveness to a particular intervention must be monitored and the data analyzed in order to make a determination relative to continuing, fading, or changing that particular strategy

Presenter Tip: At this time clarify any questions about the definition. However, be cognizant of the time allotted and assure the participants that the definition will take on deeper meaning as the session progresses.

Goals of RTI:

55 minutes

35 minutes

10 minutes

Segue: Let us return to the goals of RTI. First and foremost, prevention and early intervention supports are essential elements of School Improvement efforts. A response to intervention or similar scientific-based instructional process is being viewed by many as the bridge between the Individuals with Disabilities Education Act and the No Child Left Behind Act and one of the most powerful ways to positively influence student outcomes.

Goals of RTI

- Prevention of academic/behavior problems
 - Attend to skill gaps early
 - Provide interventions/instruction early
 - Close skill gaps to prevent failure
- Determination of eligibility as a student with a specific learning disability
 - Pattern of inadequate response to interventions may result in referral to special education
 - Student intervention response data are considered for SLD eligibility

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Presenter Note: The current slide is configured for the two main bullets to enter the screen on separate clicks in order to focus attention on the discussion of each of the two goals separately. Depending on the time available, the presenter may wish to remove the animation from the slide.

Ideas for sharing with the participants:

- Prevention - for both academic and behavior problems
 - Attend to skill gaps early -- while issues are relatively small. This is the opposite of the current “wait to fail model” historically prevalent in many schools.
 - Provide interventions/instruction early – It is more efficient and successful to intervene with small skill gaps rather than waiting until the issue is more intense and severe. In some cases, early intervening prevents the learning and inappropriate practice of a skill which may require “un-learning” before acquisition of the appropriate skill can take place.
 - Close skill gaps to prevent failure - By intervening early there is the potential to prevent failure rather than developing a need for remediation.
- Eligibility – Currently the statute and regulations speak to eligibility as it relates to a student with a specific learning disability. As schools are implementing RTI processes, they are indicating that the data yielded through the process are valuable as multi-disciplinary teams move to consideration for additional disability categorical areas, particularly in the area of emotional disabilities.
 - Pattern of inadequate response – What constitutes a pattern of inadequate response is a question that must be addressed. Additionally, the successful intervention that is very intensive and

goes far beyond one reasonable to implement within the context of general education, may also indicate a referral for additional testing and/or eligibility for special education services.

Presenter Note: The following activity is to encourage participants to reflect on what is in place and to begin to think about what needs to be added or done differently if the goals of RTI are to be accomplished. If the participants are representing a local district and if the presentation is intended to bring the group to conclusions/consensus, follow the greater time limit for this activity. If the intention of the presentation is to raise awareness and stimulate the beginnings of discussions, follow the smaller time limit for this activity. The activity may be omitted if the purpose of the presentation is raising current awareness levels and discussion is to follow at a later time.

What are we doing now that parallels the goals of RTI?: 45 minutes; 25 minutes

Team or Table Brainstorming and Whole Group Share Activity

Lead in question:

What are we doing now that parallels the goals of RTI?

Distribute **Handout #1: Goals of Response to Intervention**

Format of activity:

- Create like- or cross-stakeholder teams or work as table groups; depending on size of group and time allotment, this activity may be conducted by groups of 3 to 10 persons. (5 minutes for opening and set-up)
- Using the Goals handout, which poses critical questions regarding what is currently in place (presenter briefly highlights key phrases within the critical questions), discuss with your small group and record your responses to each critical question. (20 minutes; 10 minutes)
- Whole group sharing options (15 minutes; 5 minutes):
 - Presenter addresses each of the questions on the handout one at a time and solicits responses from the participants; participants are asked not to repeat; presenter paraphrases and validates responses on each and moves on to the next item; some questions will take very little time and others will take more; be cognizant of the time available for this activity and keep the discussion moving; highlight that within the time allotted the questions are to stimulate thinking and that as districts or buildings this will take more in-depth discussion and consensus building to move forward – If the participants are all from one district, consensus may be obtained at this time.

- As activity is conducted participants write key words from their discussion on chart paper; chart paper is posted and all participants are encouraged to ask any questions for clarification; be cognizant of the time available for this activity and keep the group moving forward.
- Whole group discussion may be omitted; the presenter summarizes at the end of the discussion time allotment and encourages teams to continue the discussion and go more in-depth in the near future.
- Presenter summarizes the statements and moves on to next slide.
(5 minutes)

RTI in Practice:

125 minutes
105 minutes
45 minutes

Segue: We have spent time with the goals of RTI; so what might response to intervention look like in practice?



Presenter Note: This slide may be omitted for the shorter presentations.

Dr, Daryl Mellard, Director of the National Research Center on Learning at the University of Kansas, identified seven elements of RTI implementation in his April 2005 presentation to the National Association of School Psychologists.

What does RTI implementation look like?

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

Presenter Note: These two slides reiterate some of the information in the slide entitled “What do we mean by RTI?” presented earlier, and contain information that is expanded upon as the presentation continues. It is suggested that the presenter paraphrase the content and not expand on the concepts to any length at this point in the presentation.

Other features of RTI

5. Continuous progress monitoring of student performance occurs (weekly or biweekly).
6. School staff use progress-monitoring data and decision rules to determine interventions' effectiveness and needed modifications.
7. Systematic assessment of the fidelity or integrity with which instruction and interventions are implemented.

Segue: As noted earlier, in order to reach the goal of prevention of academic problems, an RTI process has two or more tiers of increasingly intense interventions.

Intervention Levels

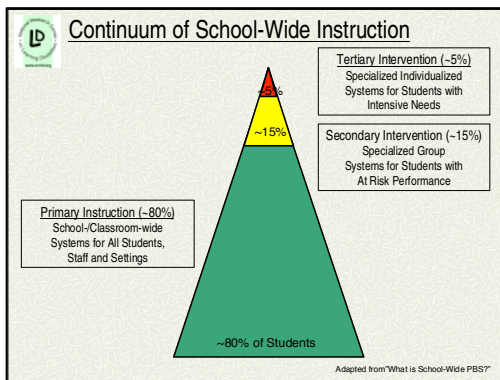
- Two or more tiers
- Tiers include increasing levels of intensity of interventions
 - Primary Instruction -- differentiated curriculum and instruction for all students
 - Secondary Interventions -- Targeted interventions for students at-risk
 - Tertiary Interventions -- Strategic/Intense interventions for students with intensive needs

Presenter Note: The next four slides expand on the tiers. This slide needs little comment at this time as it is inserted here to focus participant attention on the presentation and discussion to come.

Ideas for sharing with the participants:

- It is important to point out at this time that the model of intervention levels being presented is a three-tiered model. There are other models that include more than three tiers.
- In a three-tier model, levels of instruction/intervention are often referred to as primary, secondary, and tertiary interventions. We will explore these levels more completely as we move forward.

Segue: As noted earlier, in order to reach the goal of prevention of academic problems, an RTI process has two or more tiers of increasingly intense interventions. A graphic that is often used in conjunction with the discussion of a three-tier model is the continuum of schoolwide support as seen here and adapted from *What is School-Wide Positive Behavior Supports?* Those of you working with Reading First schools may also be familiar with a similar graphic that is currently in use relative to reading interventions.



Presenter Note: Handout #2: *Continuum of School-Wide Instruction* (identical to the slide) may be distributed for participant reference.

Ideas for sharing with the participants:

- This diagram has been used in a number of contexts within public health and education. The concepts of primary, secondary and tertiary interventions are derived from the medical/public health care model. The 80-15-5 percentages of students requiring more intense intervention tend to hold true across RTI's multi-tiers.
- If instruction, curriculum, materials and strategies are effective, 80% of students will be successful; if less than 80% are successful, then we need to discuss systems change.
- Where the general education instruction is successful, it is widely accepted that 15% of students struggle with isolated skills and/or concepts at points throughout the year.
- And, approximately, 5% of the student population will be in need of the most intensive interventions to access and progress in the curriculum.

Segue: Let us take a closer look at the expectations, assessments, intervention possibilities, and roles and responsibilities of personnel in each of these three tiers. Beginning at the primary instructional level – the bottom tier on the diagram...

Primary Instruction

- *Expectation* = 80% or more of students successful with general education curriculum and instruction
- *Assessment* = Universal screenings for academics and social/emotional growth (behaviors)
- *Intervention* = Through differentiated instructional practices
- *Roles and responsibilities* = primarily the general education teacher

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At the primary level of instruction, services are delivered through school-wide and/or classroom-wide systems and are available for all students in all settings.

Ideas for sharing with the participants:

- If instruction, curriculum, materials and strategies are effective, 80% of students will be successful; if less than 80% are successful, then we need to discuss systems change.
- All children in a class, school, or district are screened in the fall and on a regular schedule throughout the year to identify those students at risk for long-term difficulties in academics and behaviors.
- The responsiveness of at-risk students to general education instruction is monitored and interventions are provided through differentiated instructional strategies.
- Interventions provided through differentiated practices (Tier 1) are monitored to determine those students whose needs are not being met and therefore require a more intensive intervention.
- Throughout the first tier, the general education teacher is the primary instructional personnel.

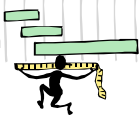
Attending to and ensuring that the primary instruction level within a tiered model is research-based and meets the needs of all students in today's diverse classrooms is imperative if one of our goals is to ensure that those identified as having specific learning disabilities do indeed have learning disabilities and, thereby, decrease current over-identification trends.

Learning gaps, in a variety of content areas, may be demonstrated by any number of students from any given subpopulation within the general education classroom setting.

Within the primary level of instruction, the use of differentiated practices is the expected norm.

Which students may have a learning gap?

- Low income
- Culturally diverse
- English language learners
- Special education
- Disengaged
- Male or female
- Career and technical education
- Gifted education



Source: National Education Association IDEA Resource Cadre presentation on Differentiated Instruction, developed in collaboration with Deborah E Burns, Curriculum Coordinator, Connecticut Public Schools and Kathleen Whitmore, Director, School Services in Speech-Language Pathology, American Speech and Hearing Association

Presenter Note: For the shorter presentations, this slide may be omitted and the comments incorporated with the next slide. This slide is not meant to be all-encompassing, but is to stimulate thought about the diversity of the typical classroom.

Ideas for sharing with the participants:

- Learning gaps for each of these student groups may occur at one time on another within the context of the curriculum.
- Within your school/district there is there a subgroup or two for whom there is a high priority in certain subject areas?
- Differentiating within a unit of study provides opportunities for students to connect with instruction and to improve outcomes.
- Paraphrase populations noted and, if time, ask for a story or two from the group relative to what is seen with particular populations in the local school/district.

Differentiated Instruction

- Meeting diverse needs of diverse student population
- Differentiating based on content and student strengths and needs
- Choosing curriculum components to differentiate
 - Within the core curriculum
 - Consistent with state learning standards

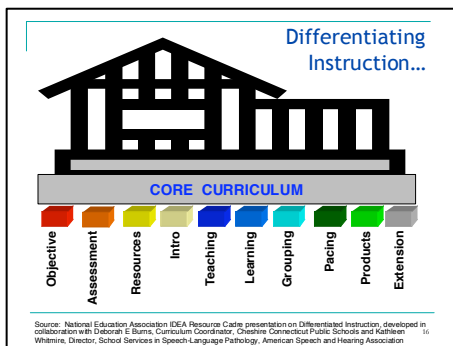
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Differentiating instruction is crucial given the diversity in classrooms today. Teachers who apply the principles of differentiated instruction based on the strengths and needs of the students in the classroom will be addressing skill gaps throughout.

Ideas for sharing with the participants:

- Diverse population – Will be specific to your local district or building.
- Diverse needs – This may be a very specific skill need relative to prerequisite skills for moving forward in a content area; may be a result of a strong preferred learning style or mode; may be attending to a communication need, etc.
- Differentiation – The decision on what and how to differentiate must be made based on student strengths and needs.
- Content and strengths and needs – Accessing content may be impeded by lack of background knowledge, low interest level, etc.

- Choosing curriculum components – Be mindful of what students are expected to know and be able to demonstrate in relation to state learning standards. Depending on the content, the specific skill to be learned and demonstrated, and the diversity of learners involved, a differentiated instructional plan will look different from classroom to classroom, from unit of study to unit of study. In some units of study one component will be differentiated, in other cases two or more may be differentiated.
- The components listed on the slide are often differentiated by teachers in classrooms across the country.



Presenter Note: For the shorter presentations, this slide may be omitted and the comments incorporated with the previous slide.

Ideas for sharing with the participants:

- These are the ten various curriculum components that are part of any subject area, topic, unit, or lesson plan.
- One or several of these components can be differentiated to accommodate student differences and enhance student achievement.
- Identification of the basic curriculum component(s) in need of differentiation is important to intervene proactively and avoid development of skill gaps unnecessarily.
- Depending on the content, the specific skill to be learned and demonstrated, and the diversity of learners involved, a differentiated instructional plan will look different from classroom to classroom, from unit of study to unit of study.

Presenter Note: The following activity is to encourage participants to reflect on what is in place and to begin to think about improving practice within Tier 1 of the RTI model. If the participants are representing a local district and if the presentation is intended to bring the group to conclusions/consensus, follow the greater time limit for this activity. If the intention of the presentation is to raise awareness and stimulate the beginnings of discussions, follow the smaller time limit for this activity. The activity may be omitted if the purpose of the presentation is raising current awareness levels and discussion is to follow at a later time.

To what degree is differentiated instruction practiced?: 50 minutes; 35 minutes

Team or Table Brainstorming and Whole Group Share Activity

Lead in question:

To what degree are we currently practicing differentiation of instruction in our classrooms? If differentiating instruction is not common practice in all general education classrooms, how do we transform practice so that differentiated instruction is the norm?

Distribute **Handout #3: Differentiating Instruction**

Format of activity:

- Create like- or cross-stakeholder teams or work as table groups; depending on size of group and time allotment, this activity may be conducted by groups of 3 to 10 persons. (5 minutes for opening and set-up)
- Using the Differentiated Instruction handout, which asks the participant to indicate the current level of implementation of differentiation of each of the 10 components of a typical lesson or unit of study, address each area from your perspective, discuss with your small group and record your responses to each area. (20 minutes; 15 minutes)
- After you have completed your assessment of current practice, address the question at the bottom of the page (What will be needed in order to transform practice so that differentiated instruction is the norm in all our classrooms?) and record your collective thoughts. (10 minutes; 5 minutes)
- Whole group sharing options (10 minutes; 5 minutes)
 - Presenter addresses each of the questions on the handout one at a time and solicits responses from the participants; participants are asked not to repeat; presenter paraphrases and validates responses on each and moves on to the next item; some questions will take very little time and others will take more; be cognizant of the time available for this activity and keep the discussion moving; highlight that within the time allotted the questions are to stimulate thinking and that moving forward with RTI will take more in-depth discussion and consensus-building. If the participants are all from one district, consensus may be obtained at this time.
 - As activity is conducted participants write key words from their discussion on chart paper; chart paper is posted and all participants are encouraged to ask any questions for clarification. Be cognizant of the time available for this activity and keep the group moving forward.

- o Whole group discussion may be omitted. The presenter summarizes at the end of the discussion time allotment and encourages teams to continue the discussion and go more in-depth in the near future.
- Presenter summarizes the statements and moves on to next slide.
(5 minutes)

Segue: As the need for interventions is identified, the RTI process includes increasing levels of intensity of interventions within a tiered model.

Secondary Intervention

- **Expectation** = 15% of students may be at risk and in need of targeted interventions
- **Assessment** = progress monitoring of student response to specific intervention
- **Intervention** = standard protocol treatment intervention as available from the research; evidence-based intervention as available in the literature
- **Roles and responsibilities** = variety of personnel as determined at the local site

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Ideas for sharing with the participants:

- Where the general education instruction is successful, it is widely accepted that 15% of students struggle with isolated skills and/or concepts at points throughout the year.
- Interventions for students with academic problems or for students with at-risk behavior are implemented at the secondary level. Often these interventions are implemented in small group settings.
- Student progress is monitored throughout and with consistency during the time that a secondary intervention is being implemented.
- For those students who respond, the intervention is faded if the intervention results in closure of the skill gap.
- For those who are responding and the skill gap is still not closed, the decision may be to continue the intervention and/or increase the frequency or duration.
- For those students who do not respond adequately to a validated intervention, the decision may be to receive other Tier 2 interventions or move to a more intensive level intervention.
- For at-risk students, a research-validated (standard protocol) intervention is implemented in most cases.
- When a research-validated intervention is not available in the research, an evidence-based intervention is chosen from education literature.
- Throughout the second tier, interventions may be delivered by a variety of personnel as determined at the local site. It is important that the person delivering the intervention is familiar with and delivers the intervention as described in the literature.

Segue: It is important to consider what types of interventions might be delivered. As mentioned earlier, at Tier 2 a standard treatment protocol intervention is preferred.

Standard Treatment Protocol Approach To Responsive-to-Intervention

- The standard treatment is for the student to receive a validated, intense intervention
- The bad news is that all students receive the same intervention
- The good news is that the interventions are well-specified, sequenced with clear outcomes
- The interventions are more likely to be delivered with fidelity; training is consistent
- Increases the consistency of services; easy to check for implementation

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Using a standard treatment protocol intervention approach encourages the use of proven strategies. It removes some of the local decision-making and reserves more creative approaches to such time as a proven intervention is unavailable for that particular skill need.

Ideas for sharing with the participants:

- The slide is self-explanatory; paraphrase the key ideas presented.
- Define fidelity of implementation: Implementation of an intervention, program, or curriculum according to research findings and/or on developers' specifications.

Segue: What do we do if a standard treatment protocol intervention is not found in the research literature? What else do we look for relative to appropriate interventions that have the potential to result in positive student outcomes?

What types of interventions?

1. Standard Treatment Protocol Interventions
 - From scientific-based education research
2. Evidence-based Interventions
 - From education research
3. Experiential-based Interventions
 - From best practice with like students

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Ideas for sharing with the participants:

- Standard Treatment Protocol Intervention
 - From scientific-based education research are
 - Demonstrated impact of effectiveness on achievement of students;
 - Large numbers of students in the study(ies);
 - Evidence of study and control groups;
 - Subject to stringent peer review process; and
 - Replicated with similar results in other studies.

- When a standard treatment protocol intervention, matching the skill need of the student(s), is known/available, it should be the first option as it has the potential to result in more positive outcomes for the students based on the proven results with similar students with similar needs.
- Evidence-based Intervention
 - From education research studies
 - Not meeting the Standard Treatment Protocol Intervention due to smaller numbers of students in the studies, lack of replication studies, relatively new research, etc.
 - When a standard treatment protocol intervention is not available for an identified student need, an evidence-based intervention is indicated as there are studies that support the intervention and the potential for positive outcomes is greater than choosing an experiential-based intervention.
- Experiential-based interventions
 - Strategies that have worked in past practice with similar students with similar needs are indicated
 - When there are few students with similar intense needs and there may not be research studies available that address such needs. There may, however, be some experiential-based strategies recorded in education literature.
 - For some skill needs the group of students is so small that teachers must rely on their own experiences and those of colleagues.
 - Use of experiential-based interventions indicates that teachers must become researchers recording the specific need of the student; describing the strategy; recording length, frequency and duration of implementation; and documenting student outcomes.
 - At the secondary level of interventions, it is anticipated that standard treatment protocol interventions and evidence-based interventions will be available to students.

Segue: As a pattern of low or inadequate response to secondary interventions is identified, a tertiary level intervention is considered and delivered. This is the level at which teachers may have to rely more often on experiential-based interventions.

Tertiary Intervention

- **Expectation** = 5% of students may be at significant risk and in need of intense interventions
- **Assessment** = progress monitoring of student response to specific intervention
- **Intervention** = standard protocol treatment intervention as available from the research; evidence-based intervention as available in the literature; unique intervention based on teacher expertise
- **Roles and responsibilities** = variety of personnel as determined at the local site

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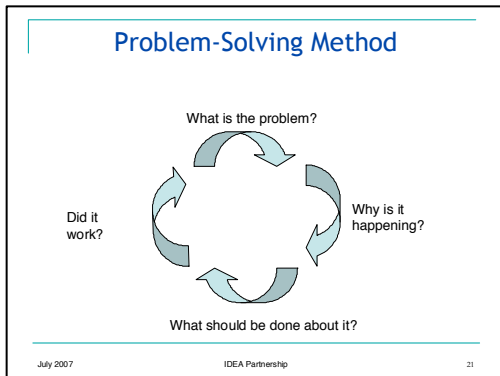
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Ideas for sharing with the participants:

- Approximately, 5% of the student population will be in need of the most intensive interventions to access and progress in the curriculum.
- Specialized interventions for students with academic problems or for students with at-risk behavior are implemented at the tertiary level. Often these interventions are provided on an individual basis.
- Student progress is monitored throughout and with consistency during the time that a tertiary intervention is being implemented.
- For those students who respond, the intervention is faded if the intervention results in closure of the skill gap.
- For those who are responding and the skill gap is still not closed, the decision may be to continue the intervention and/or increase the frequency or duration.
- If the student demonstrates a pattern of non-responsiveness to interventions he/she may be referred for a multi-disciplinary team evaluation for possible disability determination and special education placement.
- It is likely that a research-validated (standard protocol) intervention may not be available for unique intense situations.
- When a research-validated intervention is not available from the research, an evidence-based intervention is chosen from education literature.
- When an evidence-based intervention is not available from education literature, attending to professional experience in similar situations is important. Additionally, it is important that personnel engage in quality action research with the interventions being implemented in tier three.
- Throughout the third tier, interventions may be delivered by a variety of personnel as determined at the local site. It is important that the person delivering the intervention is familiar with and delivers the intervention as described in the literature and/or engaged in accurate recording of the procedures used, including length, frequency, and duration of the intervention.

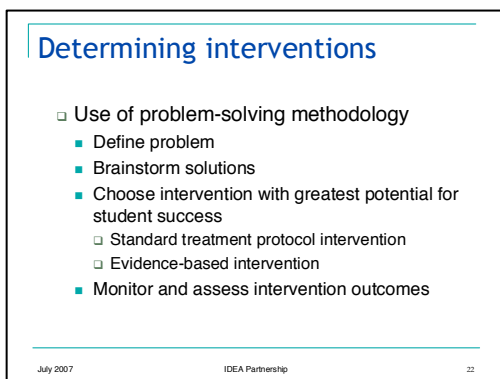
Segue: Using a problem-solving method to determine interventions to be implemented and monitored is an essential element of an RTI process.



Presenter Note: For the shorter presentations, this slide may be omitted and the comments incorporated with the following slide.

Ideas for sharing with the participants:

- These four questions will be familiar to those of you who have been involved in effective general education intervention processes.
- The process can be applied to
 - Large group decisions (e.g., core instructional decisions, environmental factors, selection of instructional strategies, selection of resources available).
 - Small group decisions (targeted or supplemental instruction).
 - Individual student decisions (intensive instruction).
- Key to implementing problem-solving component of RTI is using data to assist in answering each of the questions associated with the problem-solving method.
 - What is the problem? Academic and/or behavioral.
 - Why is it happening? What are the skill gaps?
 - What should we do about it? What intervention will be implemented?
 - Did the intervention work? How do we know our intervention worked or didn't work? What evidence do we have?



Ideas for sharing with the participants:

- Define the problem
 - Based on data collected;
 - May be an academic skill gap;
 - May be a behavioral issue – lack of pro-social skills; acting out behaviors; withdrawal behaviors.
- Brainstorm solutions
 - What scientific, research-based strategies apply to this situation?
 - What evidence-based strategies apply to this situation?
 - Are there unique strategies that apply to this situation?
- Choosing interventions
 - Which intervention has the potential for greatest positive impact?
 - Start with standard protocol interventions.
 - If no standard protocol interventions are found to apply to the situation, consider evidence-based interventions.
 - If no evidence-based interventions are found to apply to the situation, consider unique strategies.
- Monitor outcomes
 - Consistently.
 - With tools parallel to skill being addressed.
 - Document outcomes regularly in order to make decisions about fading, changing, or continuing the intervention.

Presenter Note: The following activity is to encourage participants to reflect on what is in place and to begin to think about improving practice in the use of a problem-solving approach within an RTI model. If the participants are representing a local district and if the presentation is intended to bring the group to conclusions/consensus, follow the greater time limit for this activity. If the intention of the presentation is to raise awareness and stimulate the beginnings of discussions, follow the shorter time limit for this activity. The activity may be omitted if the purpose of the presentation is raising current awareness levels and discussion is to follow at a later time.

What are we doing now that will transform into a problem-solving model that will support RTI implementation?: 40 minutes; 30 minutes

Team or Table Brainstorming and Whole Group Share Activity

Lead in question:

What are we doing now will transform into a problem-solving model that will support RTI implementation?

Distribute **Handout #3: Problem-solving Method**

Format of activity:

- Create like- or cross-stakeholder teams or work as table groups; depending on size of group and time allotment, this activity may be conducted by groups of 3 to 10 persons. (*5 minutes for opening and set-up*)
- Using the Problem-solving handout, which poses critical questions regarding what is currently in place (presenter briefly highlights key phrases within the critical questions), discuss with your small group and record your responses to each critical question. (*20 minutes; 15 minutes*)
- Whole group sharing options (*10 minutes; 5 minutes*):
 - Presenter addresses each of the questions on the handout one at a time and solicits responses from the participants; participants are asked not to repeat; presenter paraphrases and validates responses on each and moves on to the next item; some questions will take very little time and others will take more; be cognizant of the time available for this activity and keep the discussion moving; highlight that within the time allotted the questions are to stimulate thinking and that as districts or buildings this will take more in-depth discussion and consensus building to move forward – If the participants are all from one district, consensus may be obtained at this time.
 - As activity is conducted participants write key words from their discussion on chart paper; chart paper is posted and all participants are encouraged to ask any questions for clarification; be cognizant of the time available for this activity and keep the group moving forward.
 - Whole group discussion may be omitted. The presenter summarizes at the end of the discussion time allotment and encourages teams to continue the discussion and go more in-depth in the near future.
- Presenter summarizes the statements and moves on to next slide. (*5 minutes*)

Segue: Whether the intervention is a standard treatment protocol intervention from scientific-based research, or an evidence-based intervention or experiential-based intervention determined through a problem-solving method, it is important to have explicit decision rules in place to determine a level of adequate response to the intervention.

Explicit decision rules

- Necessary for determining expected response or inadequate response to intervention
- Considering
 - Expected level of achievement of peer group
 - Target for this student
 - Movement toward the target
 - Trajectory of improvement, or lack thereof

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Implicit in an effective RTI process is that there is a valid and reliable means for assessing learners' progress on a frequent basis.

Ideas for sharing with the participants:

- Expected of peer group – Where are age- grade-level students to be in knowledge and demonstration of skills in relation to the curriculum? What are the expectations as set forth in the state learning standards?
- Target for this student – What is the goal for this student? Is it the same as for all students? How long a time period is projected for the student to reach the target?
- Movement toward the target – How much growth is enough growth? What is the “allowable gap” from the average of the peer group – what is the range of acceptable proficiency?
- Trajectory of improvement – is the intervention resulting in acceptable increase in skills in relation to the target for this student over the projected timeframe?

Other important questions to be considered include:

- How often will data be collected to monitor progress?
- How many data points are needed to make an informed decision as to whether to continue, change, or fade the intervention?

These are not easy questions to answer and must be given considerable thought before implementation of an RTI process that will be effective.

Segue: Additionally, as with any program or process within a building/district, systematic and ongoing evaluation of the overall program or process must take place to determine effectiveness.

Program/Process Evaluation

- Systematic and ongoing
- Assess integrity/fidelity of implementation of interventions
- Assess integrity of implementation of overall process
 - High quality, research-based instruction
 - Screening and progress monitoring
 - Data analysis
 - Problem-solving
 - Data-driven decision-making

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Both the fidelity of implementation of interventions and the integrity of the implementation of the overall process must be monitored and evaluated continuously. All the elements of an effective RTI process, must be monitored. Such monitoring of implementation and impact aligns with current school improvement efforts across districts and states.

Advantages of RTI

35 minutes
15 minutes
5 minutes

Presenter Note: This portion of the presentation may be addressed in a variety of ways. If the participants are representing a local district and if the presentation is intended to bring the group to conclusions/consensus, the Option A activity is suggested. If the intention of the presentation is to raise awareness and stimulate the beginnings of discussions, Option B is suggested. If the purpose of the presentation is raising current awareness levels and discussion is to follow at a later time, Option C is suggested.

Option A for Advantages of RTI:

As we consider the task of transforming current practice in our classrooms to include a response to intervention process/model to address the needs of any and all struggling students, taking time to discuss the advantages and disadvantages of RTI is important to all education stakeholders.

What are the advantages and disadvantages of implementing an RTI process?:
35 minutes

Think, Pair, Share Activity

Lead in question:
What are the advantages and disadvantages of RTI?

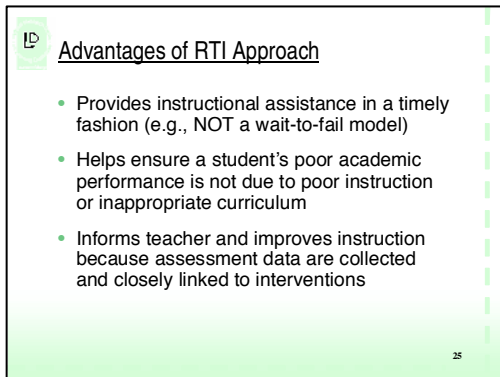
Distribute **Handout #4: RTI: Advantages/Disadvantages**

Format of activity:

- Create like- or cross-stakeholder teams or work as table groups; depending on size of group and time allotment, this activity may be conducted by groups of 3 to 10 persons. (5 minutes for opening and set-up)
- Using the Advantages/Disadvantages handout, ask participants to think individually about advantages and disadvantages of adopting and implementing a response to intervention process in the school/district. Please record your own thoughts. (5 minutes)
- Ask participants to turn to one other person at the table, and expand upon their individual thoughts; adding to the lists they have created individually. (5 minutes)
- Then ask the pairs of participants to prioritize both their list of advantages and list of disadvantages from greatest to least. (5 minutes)
- Whole group sharing (15 minutes):
 - Presenter has either a T-chart with the words “advantages” and “disadvantages” prepared ahead of time for share out; or has one chart with the heading “advantages” and one chart with the heading “disadvantages” prepared ahead of time.
 - In turn, each pair is asked to share the first item on their lists while the presenter captures key words on the charts for all to review. Participants are asked not to repeat, but to move on to their next priority if their ideas have already been brought before the group.
 - Typical advantages which may be brought forth include
 - Opportunities to intervene early and prevent failure;
 - Assessment data informs instruction; and/or
 - Interventions are specific to need of the student.
 - Typical disadvantages which may be brought forth include
 - The process will be time-consuming;
 - There will be more paperwork for teachers; and/or
 - There are not standard treatment protocol interventions for each situation.
- Presenter summarizes the statements and builds consensus around the advantages and disadvantages. At this time the presenter may opt to use or not use the following slide from Dr. Danielson’s presentation. (5 minutes)

Option B for Advantages of RTI:

Although the task of transforming to a response to intervention process to address the needs of any and all struggling students seems daunting at first, there are several advantages to implementing an RTI model.



Advantages of RTI Approach

- Provides instructional assistance in a timely fashion (e.g., NOT a wait-to-fail model)
- Helps ensure a student's poor academic performance is not due to poor instruction or inappropriate curriculum
- Informs teacher and improves instruction because assessment data are collected and closely linked to interventions

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Dr. Lou Danielson, Director, Research to Practice Division, Office of Special Education Programs, U.S. Department of Education, during a presentation to an IDEA Partnership meeting indicated that there are three primary advantages to implementation of a response to intervention approach.

Ideas for sharing with the participants:

- Timely assistance - RTI is an early intervening process for struggling students. RTI provides instructional interventions to avoid large gaps in student skills.
- Lack of instruction - May be due to many issues which may include poor attendance, high mobility, cultural differences, limited English proficiency, etc.
- Systematic data collection and analysis are integral in the RTI process.

What are the advantages and disadvantages of implementing an RTI process?:
10 minutes

Whole Group Discussion Activity

Lead-in question:

From your perspective (teacher, parent, administrator, related service provider, etc.), what do you see as the advantages of RTI?

Format of activity:

- Pose the question to the group as a whole.
- Encourage and field responses.
- Write key phrases on chart paper. It may be advantageous to organize responses by stakeholder group.
- Summarize the statements and build consensus around the advantages and disadvantages.

Option C for Advantages of RTI:

Although the task of transforming to a response to intervention process to address the needs of any and all struggling students seems daunting at first, there are several advantages to implementing an RTI model.

 **Advantages of RTI Approach**

- Provides instructional assistance in a timely fashion (e.g., NOT a wait-to-fail model)
- Helps ensure a student's poor academic performance is not due to poor instruction or inappropriate curriculum
- Informs teacher and improves instruction because assessment data are collected and closely linked to interventions

Dr. Lou Danielson, Director, Research to Practice Division, Office of Special Education Programs, U.S. Department of Education, during a presentation to an IDEA Partnership meeting indicated that there are three primary advantages to implementation of a response to intervention approach.

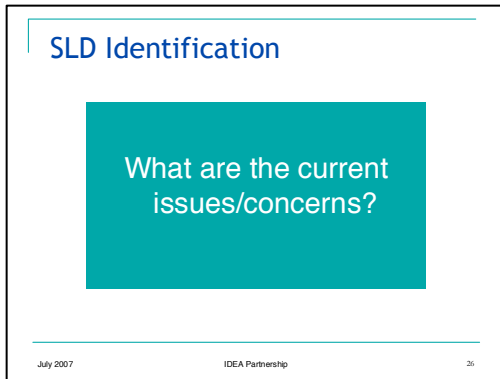
Ideas for sharing with the participants:

- Timely assistance - RTI is an early intervening process for struggling students; RTI provides instructional interventions to avoid large gaps in student skills.
- Lack of instruction - May be due to many issues which may include poor attendance, high mobility, cultural differences, limited English proficiency, etc..
- Systematic data collection and analysis are integral in the RTI process.

Issues with Current SLD Identification:

40 minutes
35 minutes
30 minutes

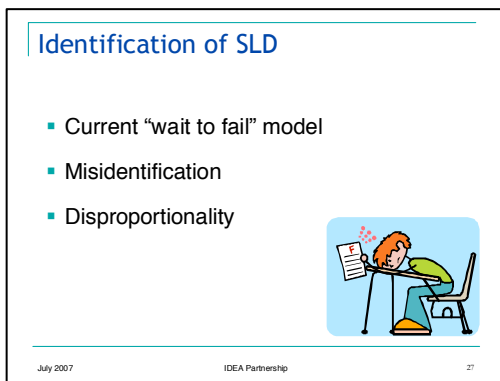
Segue: We have to this point in time taken a look at the definition, goals, and advantages of a Response to Intervention process, as well as a three-tier model in practice, So, how is this connected to identification of students with specific learning disabilities? There is reference to use of a responsiveness to intervention process in the statute and regulations, but why and how will it work are the questions.



Let us begin this discussion of SLD identification with a review of the current issues and/or problems with the current system of identification.

Presenter Note: This slide may be omitted for the shorter presentations.

There are three critical issues or concerns relative to the current system used to identify children with specific learning disabilities.



Ideas for sharing with participants:

- Wait to fail model
 - A student must demonstrate failure before receiving services;
 - Frequently resulted in students failing in school for several years prior to identification for special education services;
 - Often it would be at least third grade before a child with a processing disorder would access special education services; and
 - In the traditional model, a child had to demonstrate a discrepancy between general intellectual functioning (IQ) and academic achievement. Inherent in that process is that a child must be engaged in formal education for a period of time for achievement tests to be accurate; thus, time must pass before a discrepancy in IQ and achievement are apparent.
- Misidentification
 - Some poor readers demonstrate a discrepancy when comparing IQ and achievement, others demonstrate consistency between IQ and achievement;
 - There are many students in need of different instructional strategies to support skill acquisition – this does not necessarily mean they need “special education”; and/or

- Without appropriate differentiated instructional strategies and/or skill-specific interventions as part of general education students experience failure; after a period of failing, they have been identified as SLD due to repeated failures (most often in the area of reading).
 - 50% of students with IEPs are identified as SLD
 - 80-90% of these currently identified as children with SLD are identified because of reading difficulties
- Disproportionate representation
 - Is “**overrepresentation**” and “**underrepresentation**” of specific demographic groups of students in disability programs; could be due to misidentification.
 - African-Americans, and in certain circumstances, Hispanic and Native American/Alaskan Native students are disproportionately represented in special education in comparison to their percentages in general school population.
 - Gender also plays a role in disproportionate representation with
 - 2 times as many males as females in special education in primary school.
 - 75% of students with specific learning disabilities (SLD) students are male.
 - 76% of students with emotional disabilities (ED) are male.
 - 50%+ of students with communication disorders (CD) are male.

Presenter Note: The following activity is to encourage participants to reflect on their beliefs around the concept of SLD identification and acknowledge that beliefs and traditions do influence how a district approaches transformation from a traditional model to one that begins with an RTI process. If the participants are representing a local district and if the presentation is intended to bring the group to conclusions/consensus, follow the greater time limit for this activity. If the intention of the presentation is to raise awareness and stimulate the beginnings of discussions, follow the shorter time limit for this activity. The activity may be omitted if the purpose of the presentation is raising current awareness levels and discussion is to follow at a later time.

Why is there a problem with the current SLD identification model? 10 minutes; 5 minutes

Whole Group Discussion Activity

Lead-in question:

From your perspective (teacher, parent, administrator, related service provider, etc.), why do you suppose there continues to be a reliance on the traditional IQ-achievement discrepancy model (often referred to as the “wait to fail” model) to determine eligibility as a student with a specific learning disability when there are so many criticisms of it?

Format of activity:

- Pose the question to the group as a whole.
- Encourage and field responses.
- Possible responses may include
 - Current model is “comfortable” for many (tradition);
 - SLD identification is not consistent across the states and there is hesitancy to change when there is not a consensus on what the process should be;
 - Schools are not held accountable (sanctioned) for over-identification; and/or
 - We have not really discussed the issue in-depth
- Presenter summarizes the statements and moves on to next slide.

Segue: These criticisms of both the current definition of learning disabilities and the use of an IQ-achievement discrepancy model did not go unnoticed prior to the most recent reauthorization of the IDEA.

Prior to the 2004 reauthorization of IDEA, the Office of Special Education Programs (OSEP) commissioned a Researchers Roundtable on Learning Disabilities to make recommendations for changes in LD identification procedures. Most of the organizations that comprise the (National Joint Committee on Learning Disabilities (NJCLD) were represented at the Roundtable.

In his opening remarks to the National State Education Association Conference on SLD Determination in Kansas City, Missouri, in April 2006, Dr. Lou Danielson, Director of the Research to Practice Division of the Office of Special Education Programs, shared conclusions of the Roundtable.

**Researcher Roundtable
on Specific Learning Disabilities**

- SLD is a valid concept with converging evidence across indicators and methodologies
- SLD are disorders of learning and cognition intrinsic to the individual(s)
- Each disorder significantly affects a relatively narrow range of academic and performance outcomes
- SLD may occur in combination with other disabling conditions, but are not due primarily to other conditions

Adapted from opening remarks by Lou Danielson, Ph.D., Director, Research to Practice Division, Office of Special Education Programs to the National SEA Conference on SLD Determination, Kansas City, MO, April 19-21, 2006

Presenter Note: The slide included here is a bulleted version of the full text of the slide as presented by Dr. Danielson. Dr. Danielson's slide is included below for reference and to assist in expanding upon the bullets in this slide.

Full text of slide presented by Dr Danielson:

**Researcher Roundtable
Concept of Learning Disabilities**

Strong converging evidence supports the validity of the concept of specific learning disabilities (SLD). This evidence is particularly impressive because it converges across different indicators and methodologies. The central concept of SLD involves disorders of learning and cognition that are intrinsic to the individual. SLD are specific in the sense that these disorders each significantly affect a relatively narrow range of academic and performance outcomes. SLD may occur in combination with other disabling conditions, but they are not due primarily to other conditions, such as mental retardation, behavioral disturbance, lack of opportunities to learn, or primary sensory deficits.

Researcher Roundtable on Response to Intervention

- There should be alternate ways to identify SLD
- Response to quality intervention is the most promising method of alternate identification
 - Can promote effective practices in schools
 - Can help to close the gap between identification and treatment
- RTI should be based on problem solving models that use progress monitoring to gauge the intensity of intervention in relation to the student's response to intervention

Adapted from opening remarks by Lou Danielson, Ph.D., Director, Research to Practice Division, Office of Special Education Programs to the National SEA Conference on SLD Determination, Kansas City, MO, April 19-21, 2006

Presenter Note: The slide included here is a bulleted version of the full text of the slide as presented by Dr. Danielson. Dr. Danielson's slide is included below for reference and to assist in expanding upon the bullets in this slide.

Full text of slide presented by Dr Danielson:

Researcher Roundtable **Response To Intervention:**

There should be alternate ways to identify individuals with SLD in addition to achievement testing, history, and observations of the child. Response to quality intervention is the most promising method of alternate identification and can both promote effective practices in schools and help to close the gap between identification and treatment. Any effort to scale up response to intervention should be based on problem solving models that use progress monitoring to gauge the intensity of intervention in relation to the student's response to intervention. Problem solving models have been shown to be effective in public school settings and in research.

These recommendations resulted in new statutory language within IDEA that allows for a response to intervention process as part of the evaluation procedures for determination of eligibility as a student with a specific learning disability.

SLD Determination and IDEA 2004

(P.L. 108-446)

New language in the law:

"...a local education 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) [emphasis added]

In the special education research literature, the process mentioned in this language is generally considered as referring to RTI.

From opening remarks by Lou Danielson, Ph.D., Director, Research to Practice Division, Office of Special Education Programs to the National SEA Conference on SLD Determination, Kansas City, MO, April 19-21, 2006

Presenter Note: The language of the statute is included on the slide. Below is the regulatory language for reference.

Federal Regulatory Language as written in the OSEP Topic Brief located at <http://idea.ed.gov/explore/view/p/%2Croot%2Cdynamic%2CTopicalBrief%2C23%2C> on the US DOE "Building the Legacy: IDEA 2004" website.

A State must adopt, consistent with 34 CFR 300.309, criteria for determining whether a child has a specific learning disability as defined in 34 CFR 300.8(c)(10). In addition, the criteria adopted by the State:

- Must not require the use of a severe discrepancy between intellectual ability and achievement for determining whether a child has a specific learning disability, as defined in 34 CFR 300.8(c)(10);
- Must permit the use of a process based on the child's response to scientific, research-based intervention; and
- May permit the use of other alternative research-based procedures for determining whether a child has a specific learning disability, as defined in 34 CFR 300.8(c)(10).

A public agency must use the State criteria adopted pursuant to 34 CFR 300.307(a) in determining whether a child has a specific learning disability. [34 CFR 300.307] [20 U.S.C. 1221e-3; 1401(30); 1414(b)(6)]

It is important to note that in both statute and regulation the language is referring to the process that many are calling response to intervention (RTI). It is also important to note that the statute and the regulations state that data from "scientific, research-based interventions" may be "**part** of the evaluation procedures" for determining the presence of a specific learning disability.

Segue: So, with the encouragement of the statutory and regulatory language of IDEA '04 to use "a process based on the child's response to scientific, research-based intervention", what is it in an RTI process that will support and assist in eligibility decision-making?

RTI as part of SLD Identification:

50 minutes

35 minutes

20 minutes

RTI as part of SLD Identification

What data can RTI yield that will assist in SLD determination?

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Presenter Note: This slide may be omitted for the shorter presentations.

It is the data that are collected and documented as a student responds to specific interventions that influence the decision about whether to continue, fade, or change the intervention; and the patterns of responsiveness or low or inadequate responsiveness to the interventions are data that are important to consider when making decisions regarding eligibility.

Recall that explicit decision rules for judging learner progress relative to an intervention is a critical element of the RTI process.

Explicit decision rules

- Necessary for determining expected response or inadequate response to intervention
- Considering
 - Expected level of achievement of peer group
 - Target for this student
 - Movement toward the target
 - Trajectory of improvement, or lack thereof

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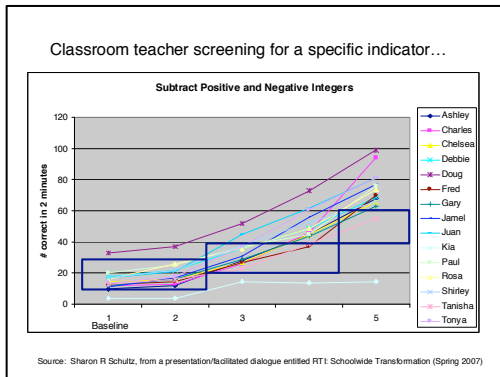
Presenter Note: This slide is identical to the one earlier in the presentation. The slide may be omitted, but it is recommended to use it here as a reminder and to connect to earlier content.

What might it look like when we have explicit decision rules? What might it look like when we document targeted and actual improvement? Let us look at sample data from a sixth grade classroom and one student, in particular.

Background information on the example classroom and skill assessed:

- Typical sixth grade classroom; not exactly typical as we are showing data for 15 students so that the slide is not too crowded.
- Data regarding math computation skill of subtracting positive and negative integers which is a typical indicator in the math standards at grade six.

Presenter Note: The following slides are also found on **Handouts #6, #7, and #8**. It is recommended that handouts be distributed at this time so that participants who may have difficulty seeing the small font on the slide have access to the content.



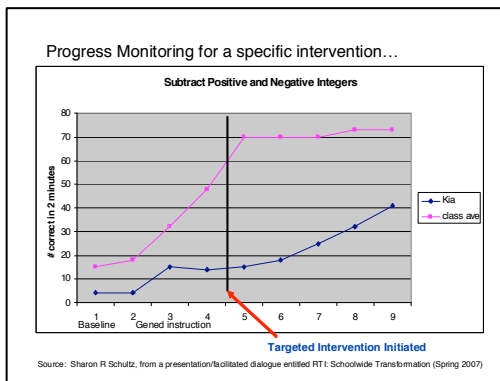
Presenter Note: The three rectangles on this slide each enter with an additional click of the mouse. These rectangles indicate expected number of digits correct at different points in the academic year. See notes below for explanation and to determine when to superimpose the rectangles.

Ideas to share with the participants:

- Teacher has conducted a pretest (screening) prior to beginning instruction
 - Set of 25 problems with a 2-minute time limit (later in the process more problems will be on the page as students become more fluent in this computational skill; however, at introduction, the teacher does not want to overwhelm the students).
 - Checking for number of digits correct (credit is given for each digit, not the total answer to a problem); e.g., $29 - (-15) = 44$ results in credit for two digits correct; $61 - (+29) = 80$ results in one digit correct; number of digits correct is the vertical on this chart.
- For simplicity in this example, the teacher is assessing progress for the whole class each week; numbers on the horizontal on this chart
- Expectations for mastery
 - The district curriculum indicates this skill should be mastered by the end of the first semester of the academic year;
 - As sixth grade students have had exposure previously to positive and negative numbers and computation, the teacher expects students to demonstrate 10 to 30 digits correct early in the teaching and learning process; this is on the pretest (data point 1) and after one lesson (data point 2);
 - After additional teaching and practice, in weeks two and three (data points 3 and 4) the typical student is expected to demonstrate mastery between 20 and 40 digits correct; and
 - After additional teaching and practice, in weeks four and five (data points 5 and 6 – notice data point 6 is not on this slide) the typical student is expected to demonstrate mastery between 20 and 40 digits correct.

- The chart provides a clear visual;
 - Probes 1 and 2: Doug is performing above expectations; 13 students are within the expected range of mastery; Kia is performing below expectation.
 - As the probes continue: more students are performing above typical expectations; several are performing in the expected range; Kia continues to perform below expectations for these sixth grade students.

To simplify this example a bit more, let us look at Kia's progress in relation to the class average.

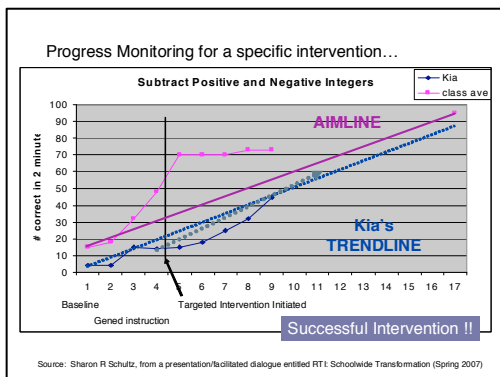


Presenter Note: “Targeted Intervention Initiated” and the red arrow enter together with one click of the mouse. See notes below to determine when to superimpose phrase and arrow.

Ideas to share with the participants:

- Data are presented for 9 probes
- The vertical line between probe 4 and probe 5 indicates the point at which it was decided that Kia would be provided with a targeted intervention (supplementary instruction and practice).
- It is clear from the visual
 - Kia is progressing; and
 - Data reveal a gap exists between her skills and the skills demonstrated by the class average data.

Let's take a closer look at her progress monitoring data to help us determine if this particular intervention is or is not successful for this student.

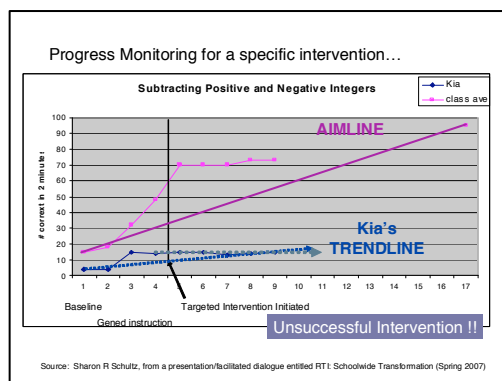


Presenter Note: Three separate mouse clicks on this slide bring in 1) aimline, 2) Kia's trendline from the first pretest data, and 3) Kia's trendline from the time of initiation of the targeted intervention, followed closely by the “successful intervention” text box. See notes below to indicate when to bring each forward.

Ideas to share with the participants:

- First things first: What is the target for all students?; this is the aimline
 - By semester end (or could be 16 lessons in 4 weeks – we are using the semester and one probe per week for simplicity), mastery is expected of all sixth grade students.
 - Mastery is defined as 95 digits correct in a 2-minute time period.
 - The aimline is drawn from the first data point to the final expected data point.
 - Notice the class is moving toward the aimline; with a steep increase in skills after the first few lessons and practice sessions; now the increase in demonstration of mastery is less of an increase as each probe is administered as they have the basic knowledge and skills and are now working on computational fluency in subtraction of negative and positive integers.
- Secondly, how is Kia doing in relation to the aimline?
 - The targeted intervention was initiated between probes 4 and 5.
 - Kia's trendline is the line drawn from her pretest to her current datapoint – if that line is extended, it is projected that she will be within 7 or 8 digits correct of expected mastery for all sixth grade students.
 - Another way to draw a trendline is to draw it relative to the data point prior to intervention and the latest point after the intervention; when drawing this line and extending it, Kia's projected level of mastery is even closer to the target for all students.
- This has been a successful targeted intervention.

So, what if the targeted intervention is not quite so successful?

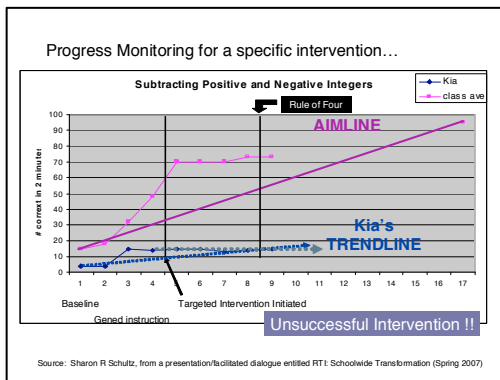


Presenter Note: As participants are now familiar with the aimline and the trendline, this slide appears in its entirety as the slide is advanced.

Ideas to share with the participants:

- As Kia's trendline is compared to the aimline, it is clear that this particular intervention is unsuccessful in supporting her to acquire the skills needed to close the gap between her performance and expected performance.

The next question to be answered is how long should we wait before we decide to fade, change, or continue a particular intervention. Continuing with the same data...

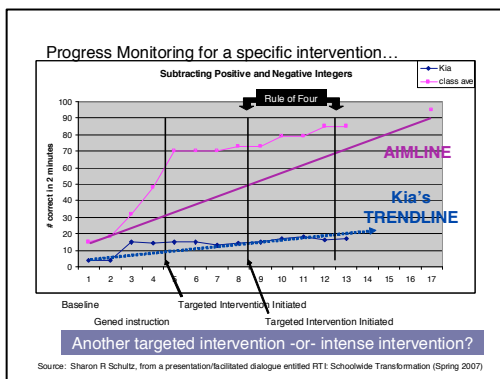


Presenter Note: This is the same as the previous slide. With an additional mouse click, the black text box, arrow and vertical line appear. See notes below to determine when to superimpose these elements.

Ideas to share with the participants:

- When do we make that decision to fade, change, or continue an intervention?
- Generally as a model based on an RTI process is being created and implemented, the district team sets a general guideline relative to this question.
- Some like to look at 3 data points as they ask the question, some prefer to look at 4 or 5 data points. Rationale for number of data points to consider varies from “too many and we may be wasting valuable instructional time” to “too few and we may not have an accurate picture”.
- Again, for simplicity, let us just settle in on what may be termed a “rule of four” – looking at 4 data points after initiation of the targeted intervention to ask whether or not it is successful for this student.
- Obviously, this particular intervention has not been successful and it is decided to implement a different intervention for her.

The next question many ask is how many targeted interventions before moving to a more intense intervention.



Presenter Note: As participants are now familiar with the data chart, this slide appears in its entirety as the slide is advanced.

Ideas to share with the participants:

- Kia has now participated in two targeted interventions, the decision now must be made as to whether a third targeted intervention will be implemented or if a more intensive intervention is indicated.
- It could be that the second targeted intervention was successful and now is being faded as she works on computational fluency as does the rest of her classmates.
- Suppose that this data is a result of two more intensive interventions; then the next question might be “Do we implement a different intensive intervention? Do we continue this intervention and refer to special education for additional assessment for a possible learning disability? Do we implement a different intensive intervention and refer to special education for additional assessment for a possible learning disability? “
- This is a simplified version. A student would not be referred for additional assessment for SLD based on low performance in one discrete computational skill, but similar data across computational skills certainly would be a time to raise the questions about referral for additional assessment for SLD.
- Remember that as clear as these data from progress monitoring with RTI are, they cannot stand alone for eligibility determination. The data from an RTI process can be **part** of the data considered for eligibility determination.

Having explicit decision rules to determine student response to an intervention or interventions, raises additional questions about RTI process implementation that must be addressed if the process is to be effective and efficient in providing supporting data for SLD determination.

Critical questions to be addressed and answered include:

Monitoring progress...

- How often will skill probes be administered?
- How many probes will be administered before determining to continue, fade, or change a particular intervention?
- What is a pattern of inadequate response?
 - How many different interventions at each tier?
 - How much time in each tier?

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Presenter Note: These questions may be addressed in a variety of ways. If the participants are representing a local district and if the presentation is intended to bring the group to deeper reflection and begin building their local RTI process, the Option A activity is suggested. If the intention of the presentation is to raise awareness and stimulate the beginnings of discussions, Option B is suggested.

If the purpose of the presentation is raising current awareness levels and discussion is to follow at a later time, Option C is suggested.

Option A for questions regarding monitoring progress:

Continuous progress monitoring is imperative in an RTI process. Addressing expectations for data collection and documentation is important in order to move forward with implementation.

How will we monitor student progress?: 35 minutes

Pair and Share Activity

Lead in question:

As we move toward implementation of RTI, how and when will we collect and document student progress in relation to specific interventions?

Distribute **Handout #9: Progress Monitoring Data Collection**

Format of activity:

- Create like- or cross-stakeholder teams or work as table groups; depending on size of group and time allotment, this activity may be conducted by groups of 3 to 10 persons. (5 minutes for opening and set-up)
- Using the data collection handout, ask participants to pair with one other person at the table and discuss the pros and cons of the questions presented on the handout. Please record your thoughts. (10 minutes)
- Whole group sharing (15 minutes):
 - Presenter asks each of the three main questions allowing for 5 minutes of discussion on each question.
 - As participants offer their thoughts on each question ensure that rationale for each recommendation is explained.
 - As participants offer their thoughts be sure that discussion occurs and that a few are not dominating the discussion.
- Presenter summarizes the statements and builds consensus around the recommendations. (5 minutes)

Option B for questions regarding monitoring progress:

Continuous progress monitoring is imperative in an RTI process. Addressing expectations for data collection and documentation is important in order to move forward with implementation.

How will we monitor student progress?: 20 minutes

Whole Group Discussion Activity

Lead in question:

As we move toward implementation of RTI, how and when will we collect and document student progress in relation to specific interventions?

Present the slide with the questions.

Format of activity:

- Presenter asks each of the three main questions allowing for 5 *minutes* of discussion on each question.
- As participants offer their thoughts on each question ensure that rationale for each recommendation is explained.
- As participants offer their thoughts be sure that discussion occurs and that a few are not dominating the discussion.
- Presenter summarizes the statements and builds consensus around the recommendations. (5 *minutes*)

Option C for questions regarding monitoring progress:

Continuous progress monitoring is imperative in an RTI process. Addressing expectations for data collection and documentation is important in order to move forward with implementation..

Monitoring progress...

- How often will skill probes be administered?
- How many probes will be administered before determining to continue, fade, or change a particular intervention?
- What is a pattern of inadequate response?
 - How many different interventions at each tier?
 - How much time in each tier?

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Present the slide and introduce the questions as ones that must be addressed prior to implementation.

Ideas for sharing with the participants:

- How often - Will probes be administered weekly? Will it be more often when the research indicates a standard treatment intervention was used for a short period of time? Will it be less often when the research indicates the intervention is to be implemented over a long period of time?
- How many probes - How many probes are required to develop a trend? How much information do you need to make a decision?
- What is a pattern of inadequate response? – Does inadequate response to one Tier 2 intervention indicate a need for a Tier 3 intervention?

Resources for Further Consideration:

20 minutes

10 minutes

10 minutes

Presenter Note: For the longer presentation it is suggested that the presenter may want to have internet access available and demonstrate available internet resources at www.ncrld.org, www.rfcnetwork.org, and www.ideapartnership.org.

Segue: We have explored RTI and SLD eligibility today and have much more to consider before creating and implementing a local process. There are several resources available to us as we continue our discussions and deliberations.

 **RTI Symposium**

- Participants included advocates, instructional staff, researchers, and state-level education officials
- Speakers shared knowledge / expertise, organized around **six questions** related to RTI implementation in both school districts and research sites
- Symposium materials (e.g., papers, PowerPoint presentations, video highlights) are available on our website: www.ncrld.org

In December 2003, the National Research Center on Learning Disabilities, a collaborative project of staff at Vanderbilt University and the University of Kansas, sponsored a two-day symposium focusing on responsiveness-to-intervention (RTI) issues. The speakers, discussants, and participants assembled represented the wide diversity of individuals with a vested interest in LD determination issues. Advocates, instructional staff, researchers, and state-level education officials brought their collective and considerable expertise to the discussions.

The six major topics address at that symposium were

- How should screening for secondary intervention occur?
- How should secondary intervention be formulated?
- What are the feasibility and consequences of RTI?
- How should “unresponsiveness” to secondary intervention be operationalized in an RTI approach to LD identification?
- How many tiers are needed within RTI to achieve acceptable prevention outcomes and to achieve acceptable patterns of LD identification?
- What are alternative models to LD identification other than RTI?

Presenter Note: Handout #10 may be distributed. The handout lists six topics with names of the presenters and the panel discussants.

Additional materials (papers, PowerPoint presentations, video clips) are available on the NRCLD website at www.nrclld.org.

Regional Resource Centers

www.rfcnetwork.org

- **Federal Resource Center**
 - Michele Rovins, Director
- **Region 1: Northeast**
 - Kristin Reedy, Director
- **Region 2: Mid-South**
 - Kenneth Warlick, Director
- **Region 3: Southeast**
 - Elizabeth Beale, Director
- **Region 4: North Central**
 - Michael Sharpe, Director
- **Region 5: Mountain Plains**
 - John Copenhaver, Director
- **Region 6: Western**
 - Caroline Moore, Director

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The Regional Federal Resource Centers are available to support state and local efforts. Information on the Regional Resource Centers is found at www.rfcnetwork.org.

Handout #11: *Federal Regional Resource Center Map* may be distributed.

The Regional Resource and Federal Centers (RRFC) Network is made up of the six Regional Resource Centers for Special Education (RRC) and the Federal Resource Center (FRC).

The six RRCs and the FRC are funded by the federal Office of Special Education Programs to assist state education agencies in the systemic improvement of education programs, practices, and policies that affect children and youth with disabilities. These centers offer consultation, information services, technical assistance, training, and product development.

For More Information: IDEA Partnership's RTI Initiative

Website: www.ideapartnership.org

- A Partnership Collection on RTI
- Many Journals, Many Voices
- Results for Kids: Resources

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By accessing the Partnership website, you will find resource information that is updated regularly as well as links to all the partner organizations.

Summary Statements:

5 minutes
5 minutes
5 minutes

The presenter now summarizes the content and discussions of the day. The agenda slide may be shown again as the content is reviewed. If there is to be a follow-up session, this is the time to clarify the plans for the next meeting.

Handout #12: *Glossary of RTI Terms and Acronyms* may be distributed for reference.



Presenter Note: This slide is recommended for use with the 2.5-hour presentation. It may also be of value for the two longer presentations, if time allows.

Q&A:

Whole Group Discussion Activity

Lead in statement and questions:

Now that we have spent time exploring RTI and SLD identification...

- What issues are coming to the forefront for you?
- What questions are uppermost in your mind?

Format of activity:

- Open the floor for discussion.
- Paraphrase and repeat whenever clarity is needed.
- Answer questions that are answerable.
- Record
 - Questions for which there are no answers at this time;
 - Issues to explore;
 - Concerns about implementation; and
 - Suggestions for moving forward.
- Facilitate so that all may share in the discussion. Should one or two persons seem to be dominating the discussion, ask for a response from a specific table, or from a specific person.

Trainer Tip: Capture key ideas on chart paper. Visual recording honors the work of the group and indicates there will be follow up relative to the ideas generated in this session.

Presenter paraphrases and summarizes the discussion. He/she indicates where the responses from the discussion will go from here.

Response to Intervention Supplementary Materials

- Handout #1: *Goals of Response to Intervention*
- Handout #2: *Continuum of School-Wide Instruction*
- Handout #3: *Differentiating Instruction*
- Handout #4: *Problem-Solving Method*
- Handout #5: *Response to Intervention: Advantages/Disadvantages*
- Handout #6: *Classroom Screening and Monitoring Progress*
- Handout #7: *Progress Monitoring a Specific Skill*
- Handout #8: *Progress Monitoring a Specific Skill (continued)*
- Handout #9: *Progress Monitoring Data Collection*
- Handout #10: *NRCLD Symposium*
- Handout #11: *Federal Regional Resource Center Map*
- Handout #12: *Learning Disabilities Resource Kit*
- Handout #13: *Glossary of RTI Terms and Acronyms*

Goals of Response to Intervention (RTI)

Prevention of Academic Problems

- What procedures are currently in place to identify students with skill gaps in reading? In writing? In mathematics?
- When academic skill gaps are identified, how are they addressed? How are interventions provided?
- What data do we have that evaluate the outcomes of interventions provided for academic skill gaps?

Prevention of Behavior Problems

- What procedures are currently in place to identify students with behavioral skill gaps?
- When behavioral skill gaps are identified, how are they addressed? How are interventions provided?
- What data do we have that evaluate the outcomes of interventions provided for behavioral skill gaps?

Intervention Data for Determination of Eligibility as a Student with a Specific Learning Disability (SLD)

- What procedures are currently in place to consider intervention data from general education and other sources when referral is made to special education?
- What types of data are available in relation to interventions implemented prior to referral?

Source: IDEA Partnership workgroup

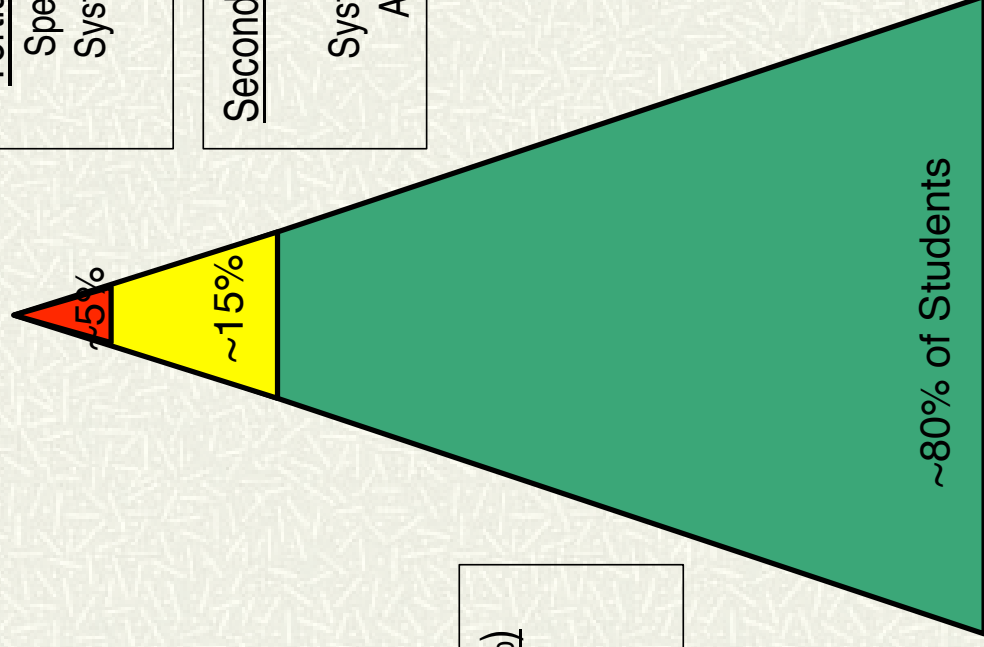
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RTI and SLD Identification Presenter's Guide
IDEA Partnership @ NASDSE

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Continuum of School-Wide Instruction



Primary Instruction (~80%)
School-/Classroom-wide
Systems for All Students,
Staff and Settings

Secondary Intervention (~15%)
Specialized Group
Systems for Students with
At Risk Performance

Tertiary Intervention (~5%)
Specialized Individualized
Systems for Students with
Intensive Needs

Adapted from "What is School-Wide PBS?"

Differentiating Instruction

<i>Curriculum Components which may be Differentiated</i>	Level of Current Implementation by Percentage of Classrooms											
	Elementary School				Middle School				High School			
<i>Content/Objectives</i> What a student should know, understand, and be able to do as a result of this lesson/unit of study	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%
<i>Assessment Strategies/Tools</i> Both formative and summative; with a direct match to the content/objectives	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%
<i>Resources/Materials to support student learning</i> Matched to content and learner preferences	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%
<i>Introduction and/or Closure of the lesson/unit of study</i> To engage and to connect learning	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%
<i>Teaching Strategies</i> Matched to content and learner preferences	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%
<i>Learning Activities</i> Matched to content and learner preferences <i>Flexible</i>	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%
<i>Grouping</i> Based on student learning strengths, interests, needs	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%
<i>Pacing of content and activities</i> Based on student level of understanding and knowledge/skill acquisition	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%
<i>Products to demonstrate knowledge and skills</i> Matched to content and learner preferences	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%
<i>Extension Activities</i> To link to other content or ideas, to explore new ideas or solutions, to transfer knowledge, etc.	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%	0-25%	26-50%	51-75%	76-100%

What will be needed in order to transform practice so that differentiated instruction is the norm in all our classrooms?

Source: Sharon R Schultz, S² Educational Consulting, 5753 Catskill Road, Holiday, Florida

Problem-Solving Method

- Define problem
- Brainstorm solutions
- Choose intervention with greatest potential for student success
- Monitor and assess intervention outcomes

When and where do we currently engage in a problem-solving method to determine needed academic interventions?

When and where do we currently engage in a problem-solving method to determine needed behavioral interventions?

To what degree do we search the literature for scientific, research-based interventions to meet student needs?

To what degree do we search the literature for evidence-based interventions to meet student needs?

To what degree do we engage in ongoing systematic monitoring and assessment of intervention outcomes?

What part of the problem-solving model do we do well and will transform with some ease into an RTI model?

What part of the problem-solving model do we need to investigate and provide professional development on in order to transform into an RTI model?

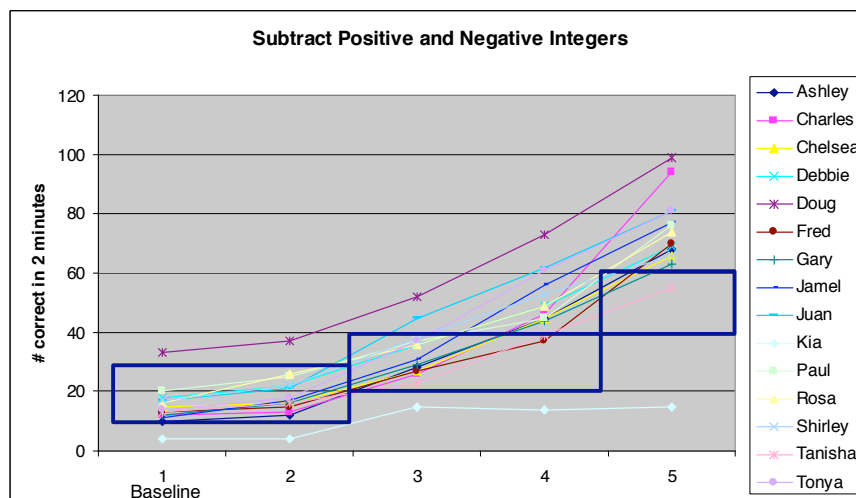
Response-to-Intervention

<i>Advantages</i>	<i>Disadvantages</i>

Source: IDEA Partnership workgroup

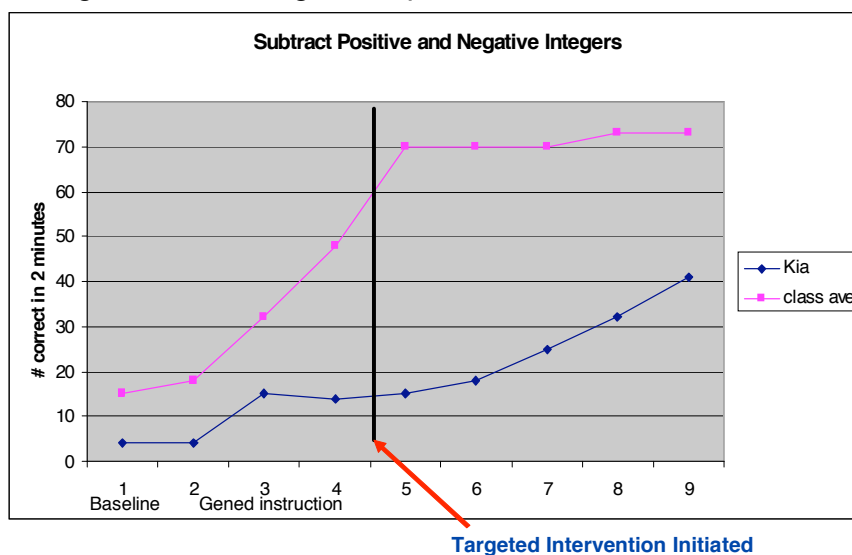
Classroom Screening and Monitoring Progress

Classroom teacher screening for a specific indicator...



Source: Sharon R Schultz, from a presentation/facilitated dialogue entitled RTI: Schoolwide Transformation (Spring 2007)

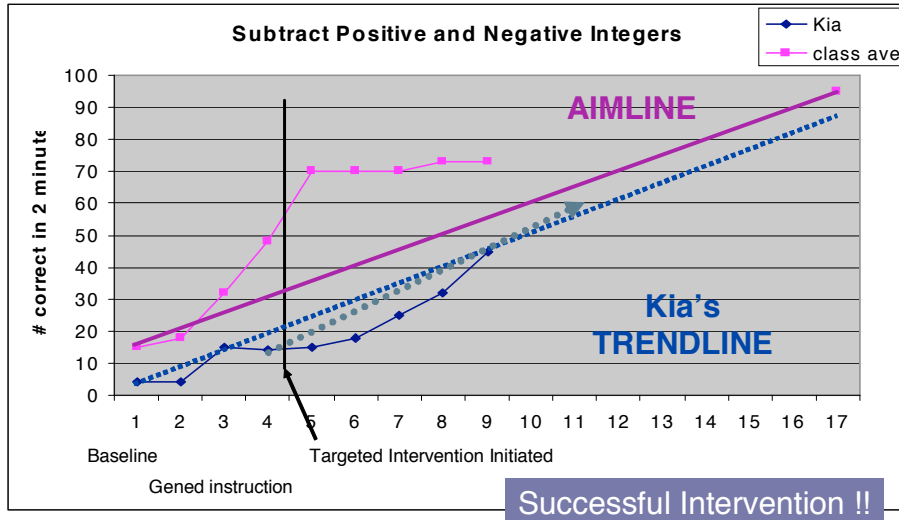
Progress Monitoring for a specific intervention...



Source: Sharon R Schultz, from a presentation/facilitated dialogue entitled RTI: Schoolwide Transformation (Spring 2007)

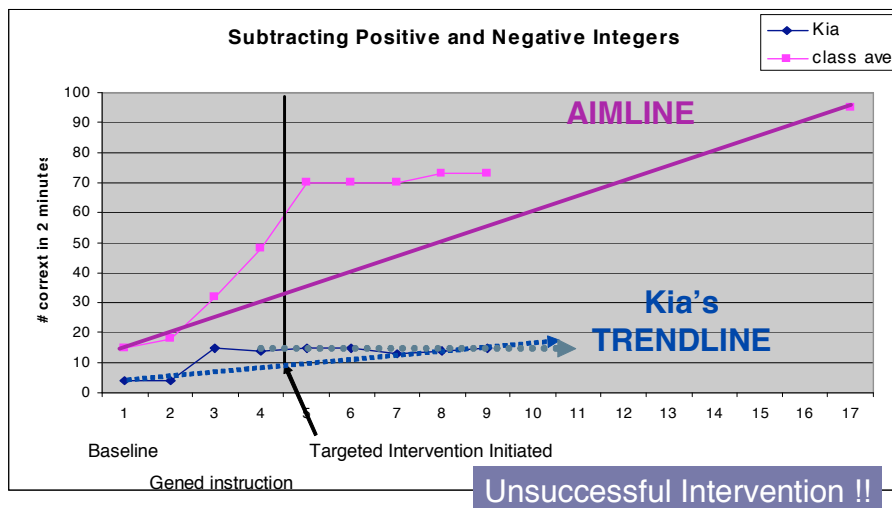
Progress Monitoring a Specific Skill

Progress Monitoring for a specific intervention...



Source: Sharon R Schultz, from a presentation/facilitated dialogue entitled RTI: Schoolwide Transformation (Spring 2007)

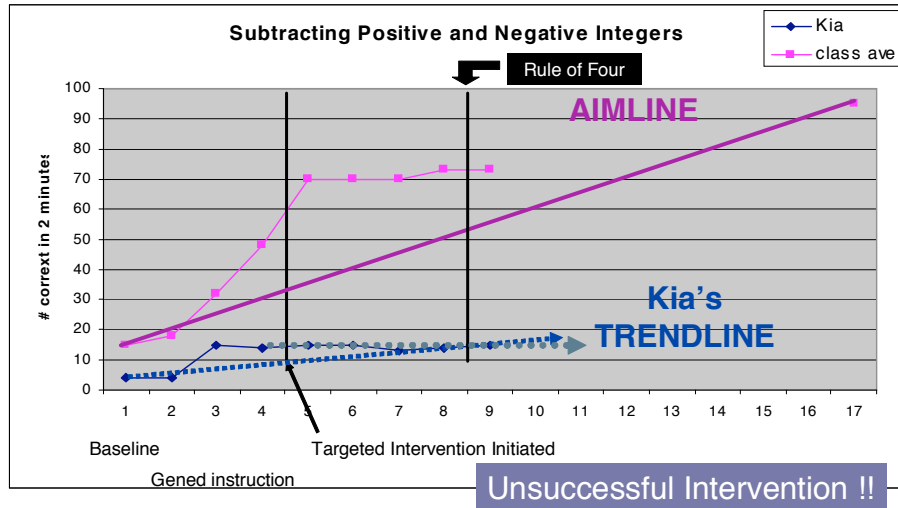
Progress Monitoring for a specific intervention...



Source: Sharon R Schultz, from a presentation/facilitated dialogue entitled RTI: Schoolwide Transformation (Spring 2007)

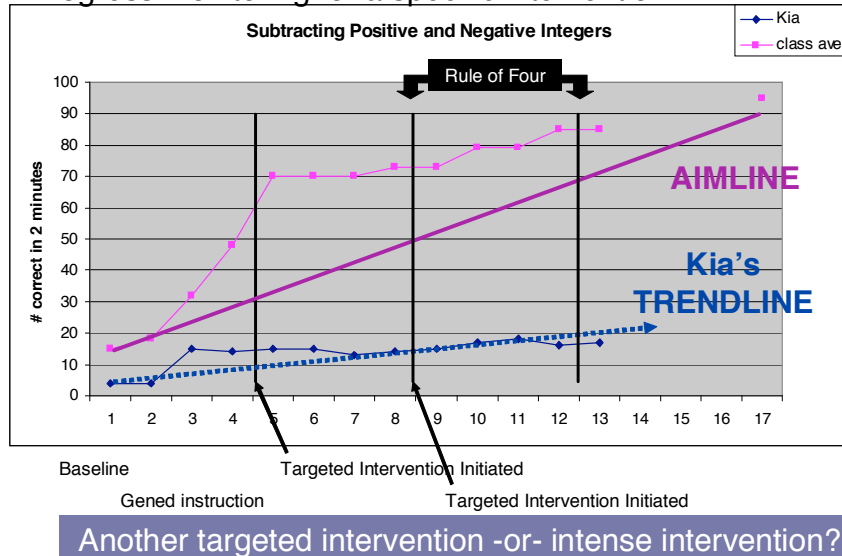
Progress Monitoring a Specific Skill (continued)

Progress Monitoring for a specific intervention...



Source: Sharon R Schultz, from a presentation/facilitated dialogue entitled RTI: Schoolwide Transformation (Spring 2007)

Progress Monitoring for a specific intervention...



Source: Sharon R Schultz, from a presentation/facilitated dialogue entitled RTI: Schoolwide Transformation (Spring 2007)

Progress Monitoring Data Collection and Documentation

How often will skill probes be administered? Should it be weekly, daily, or after a specific number of intervention sessions? *What do you recommend and why?*

How many probes will be administered before determining to continue, fade, or change a particular intervention? *What do you recommend and why?*

What is a pattern of inadequate response? How many different interventions at each tier? How much time in each tier? *What do you recommend and why?*

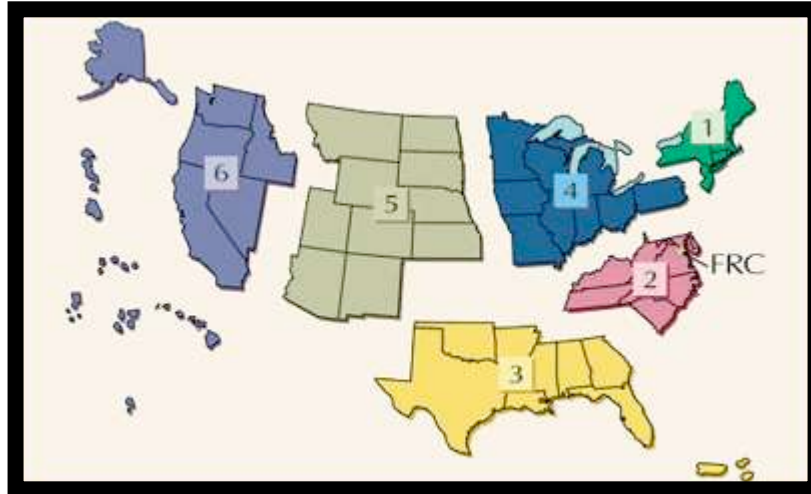
Source: IDEA Partnership workgroup

National Research Center on Learning Disabilities
Symposium on Response to Intervention
December 2003

- **How should screening for secondary intervention occur?**
 - *Presenters:* David Francis, Joe Jenkins, Deborah Speece
 - *Discussant:* Barbara Foorman
- **How should secondary intervention be formulated?**
 - *Presenters:* Doug Fuchs, Jeff Grimes & Sharon Kurns, Debra Kamps
 - *Discussant:* Joe Kovalesski
- **What are the feasibility and consequences of RTI?**
 - *Presenters:* Mike Gerber, Dan Reschly
 - *Discussants:* Larry Gloeckler, Margo Mastropieri
- **How should “unresponsiveness” to secondary intervention be operationalized in an RTI approach to LD identification?**
 - *Presenters:* Roland Good, Joe Torgesen, Frank Vellutino
 - *Discussant:* Don Compton
- **How many tiers are needed within RTI to achieve acceptable prevention outcomes and to achieve acceptable patterns of LD identification?**
 - *Presenters:* Rollanda O'Connor, David Tilly, Sharon Vaughn
 - *Discussant:* Doug Marston
- **What are alternative models to LD identification other than RTI?**
 - *Presenters:* Jack Fletcher, Ken Kavale, Tom Scruggs, Margaret Semrud-Clikeman

Additional materials (papers, PowerPoint presentations, video clips) are available on the NRCLD website at www.nrclld.org.

The Regional Resource and Federal Centers (RRFC) Network is made up of the six Regional Resource Centers for Special Education (RRC) and the Federal Resource Center (FRC).



Federal Resource Center for Special Education
Academy for Educational Development
1825 Connecticut Avenue NW
Washington, DC 20009

Region 1: Northeast Regional Resource Center
(VT Office)
Learning Innovations/WestEd
20 Winter Sport Lane
Williston, VT 05495
(MA Office)
Learning Innovations/WestEd
200 Unicorn Park
Woburn, MA 01801

Region 2: Mid-South Regional Resource Center
Interdisciplinary Human Development Institute
University of Kentucky
1 Quality Street, Suite 722
Lexington, Kentucky 40506-0051

Region 3: Southeast Regional Resource Center
PO Box 244023
Montgomery, AL 36124-4023

Region 4: North Central Regional Resource Center
5 Pattee Hall
150 Pillsbury Dr. SE
Minneapolis, MN 55455

Region 5: Mountain Plains Regional Resource Center
1780 North Research Parkway
Suite 112
Logan, Utah 84341

Region 6: Western Regional Resource Center
1268 University of Oregon
Eugene, Oregon 97403

More information available at www.rrfcnetwork.org.

Learning Disabilities Resource Kit: Specific Learning Disabilities Determination Procedures and Responsiveness to Intervention

(Winter 2007)

NRCLD has developed this kit to help you navigate changes related to specific learning disability determination and responsiveness to intervention.

All materials in this kit are in the public domain. Authorization to reproduce it in whole or in part is granted. Although permission to reprint these publications is not necessary, please include the citation provided on each document.

Download the complete Learning Disabilities Resource Kit (zip, 13.6 MB)

Note: You must have Adobe Acrobat Reader installed on your computer to open the pdf files in the Learning Disabilities Resource Kit.

- General information
- Tools for change
- Getting Started manual
- RTI manual
- Powerpoint presentations
- Parent pages

Located at: http://www.nrclld.org/resource_kit/

Response to Intervention

Key Terms and Acronyms

Aimline

Line on a graph that represents expected student growth over time

Core Principles of RTI

Beliefs, dispositions necessary for RTI processes to be effective

- All children can learn when taught with effective practices
- Early intervening for struggling learners is essential
- Use of a multi-tier model of service delivery
- Utilization of a problem-solving methodology

Curriculum Based Assessment (CBA)

Measurement that uses direct observation and recording of a student's performance in the local curriculum as a basis for gathering information to make instructional decisions

Curriculum Based Measurement (CBM)

Tools for measuring student competency and progress in the basic skill areas of reading fluency, spelling, mathematics and written language

Data Points

Points on a graph that represent student achievement or behavior relative to a specific assessment at a specific time

Dependent Variable

Element which may be influenced or modified by some treatment or exposure

Differentiated Instruction

Process of designing lesson plans that meet the needs of the range of learners; such planning includes learning objectives, grouping practices, teaching methods, varied assignments, and varied materials chosen based on student skill levels, interest levels, and learning preferences; differentiated instruction focuses on instructional strategies, instructional groupings, and an array of materials

Discrepancy

Difference between two outcome measures

IQ-Achievement discrepancy – difference between scores on a norm-referenced intelligence test and a norm-referenced achievement test

Difference between pre-test and post-test on a criterion-referenced test

Disproportionality

Over-identification, or under-identification, of students from minority populations who are served through special education;

Essential components of an RTI process

Core components of an effective RTI process include

- Multi-tier model
- Problem-solving method
- Integrated data collection and assessment system

Evidence-based Practice

Educational practices/instructional strategies supported by relevant scientific research studies

Exclusionary Factors

The determination of eligibility for a specific learning disability must not be primarily the result of one of the following factors: *[from federal regulation §300.309(a)(3)]*

- (i) A visual, hearing, or motor disability;
- (ii) Mental retardation;
- (iii) Emotional disturbance;
- (iv) Cultural factors;
- (v) Environmental or economic disadvantage; or
- (vi) Limited English proficiency.

Fidelity of Implementation

Implementation of an intervention, program, or curriculum according to research findings and/or on developers' specifications

Formative Assessment/Evaluation

Classroom/curriculum measures of student progress; monitors progress made towards achieving learning outcomes; informs instructional decision-making

Functional Assessment

Behaviors: Process to identify the problem, determine the function or purpose of the behavior, and to develop interventions to teach acceptable alternatives to the behavior

Academics: Process to identify the skill gap, strategies that have and have not been effective, and to develop interventions to teach the necessary skill(s)

IDEA - Individuals with Disabilities Education Improvement Act of 2004 also referred to as IDEA '04
Original passage in 1975; latest reauthorization in 2004; federal statute relative to public education and services to students with disabilities ages 3 through 21

IDEA Partnership

IDEA Part D federal grant; collaboration of 55 plus national organizations, technical assistance providers, and State and local organizations and agencies, together with the Office of Special Education Programs (OSEP),

Independent Variable

Variable which is manipulated or selected by the researcher to determine relationship to a dependent variable; independent variable is the element that someone actively controls/changes (instructional strategy/intervention); while the dependent variable (student demonstration of skills) is the element that changes as a result

Integrity of intervention implementation

See Fidelity

Intensive Interventions

Academic and/or behavioral interventions characterized by increased length, frequency, and duration of implementation for students who struggle significantly; often associated with narrowest tier of an RTI tiered model; also referred to as tertiary interventions

Key practices in RTI

Practices necessary for RTI processes to be effective

- Using research-based, scientifically validated instruction and interventions
- Monitoring of student progress to inform instruction
- Making decisions based on data
- Using assessments for universal screening, progress monitoring, and diagnostics

LEA– Local Education Agency

Refers to a specific school district or a group of school districts in a cooperative or regional configuration

Learning Disability/Specific Learning Disability (SLD)

[from federal regulation §300.309(a)(1)]

The child does not achieve adequately for the child's age or to meet State-approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the child's age or State-approved grade-level standards:

- (i) Oral expression.
- (ii) Listening comprehension.
- (iii) Written expression.
- (iv) Basic reading skill.
- (v) Reading fluency skills.
- (vi) Reading comprehension.
- (vii) Mathematics calculation.
- (viii) Mathematics problem solving.

Learning Rate

Average progress over a period of time, i.e. one-year's growth in one year's time

Positive Behavior Supports

Evidence-based practices embedded in the school curriculum/culture/expectations that have a prevention focus; teaching, practice, and demonstration of pro-social behaviors

Primary Levels of Intervention

Interventions that are preventive and proactive; implementation is school-wide or by whole-classroom; often connected to broadest tier (core or foundational tier) of a tiered intervention model

Problem-solving Approach to RTI

Assumes that no given intervention will be effective for all students; generally has four stages (problem identification, problem analysis, plan implementation, and plan evaluation); is sensitive to individual student differences; depends on the integrity of implementing interventions

Problem-solving Team

Group of education professionals coming together to consider student-specific data, brainstorm possible strategies/interventions; and develop a plan of action to address a student-specific need

Progress Monitoring

A scientifically based practice used to assess students' academic performance and evaluate the effectiveness of instruction. Progress monitoring can be implemented with individual students or an entire class. Also, the process used to monitor implementation of specific interventions.

Response to Intervention / Response to Instruction / Responsiveness to Intervention (RTI)

Practice of providing high quality instruction and interventions matched to student need, monitoring progress frequently to make changes in instruction or goals and applying child response data to important educational decisions

RTI – Response to Intervention / Response to Instruction / Responsiveness to Intervention

See above

Scientifically-based Research

Education related research that meets the following criteria

- Analyzes and presents the impact of effective teaching on achievement of students
- Includes large numbers of students in the study
- Includes study and control groups
- Applies a rigorous peer review process
- Includes replication studies to validate results

Scientific, Research-based Instruction

Curriculum and educational interventions that have been proven to be effective for most students based on scientific study

Screening – See Universal screening

SEA – State Education Agency

Refers to the department of education at the state level

Secondary Levels of Intervention

Interventions that relate directly to an area of need; are supplementary to primary interventions; are different from primary interventions; often implemented in small group settings; may be individualized; often connected to supplemental tier of a tiered intervention model

Specific Learning Disability

See Learning Disability

Standard Protocol Intervention

Use of same empirically validated intervention for all students with similar academic or behavioral needs; facilitates quality control

Strategic Interventions Specific to Needs

Intervention chosen in relation to student data and from among those that have been documented through education research to be effective with like students under like circumstances; often associated with second tier of an RTI tiered model; also referred to as secondary interventions

Summative Assessment/evaluation

Comprehensive in nature, provides accountability and is used to check the level of learning at the end of a unit of study

Systematic Data Collection

Planning a timeframe for and following through with appropriate assessments to set baselines and monitor student progress

Tertiary Levels of Intervention

Interventions that relate directly to an area of need; are supplementary to primary and secondary interventions; are different from primary and secondary interventions; usually implemented individually or in very small group settings; may be individualized; often connected to narrowest tier of a tiered intervention model

Tiered Instruction

Levels of instructional intensity within a tiered model

Tiered Model

Common model of three or more tiers that delineate levels of instructional interventions based on student skill need

Trendline

Line on a graph that connects data points; compare against aimline to determine responsiveness to intervention

Universal screening

A process of reviewing student performance through formal and/or informal assessment measures to determine progress in relation to student benchmarks; related directly to student learning standards

Validated Intervention

Intervention supported by education research to be effective with identified needs of sets of students