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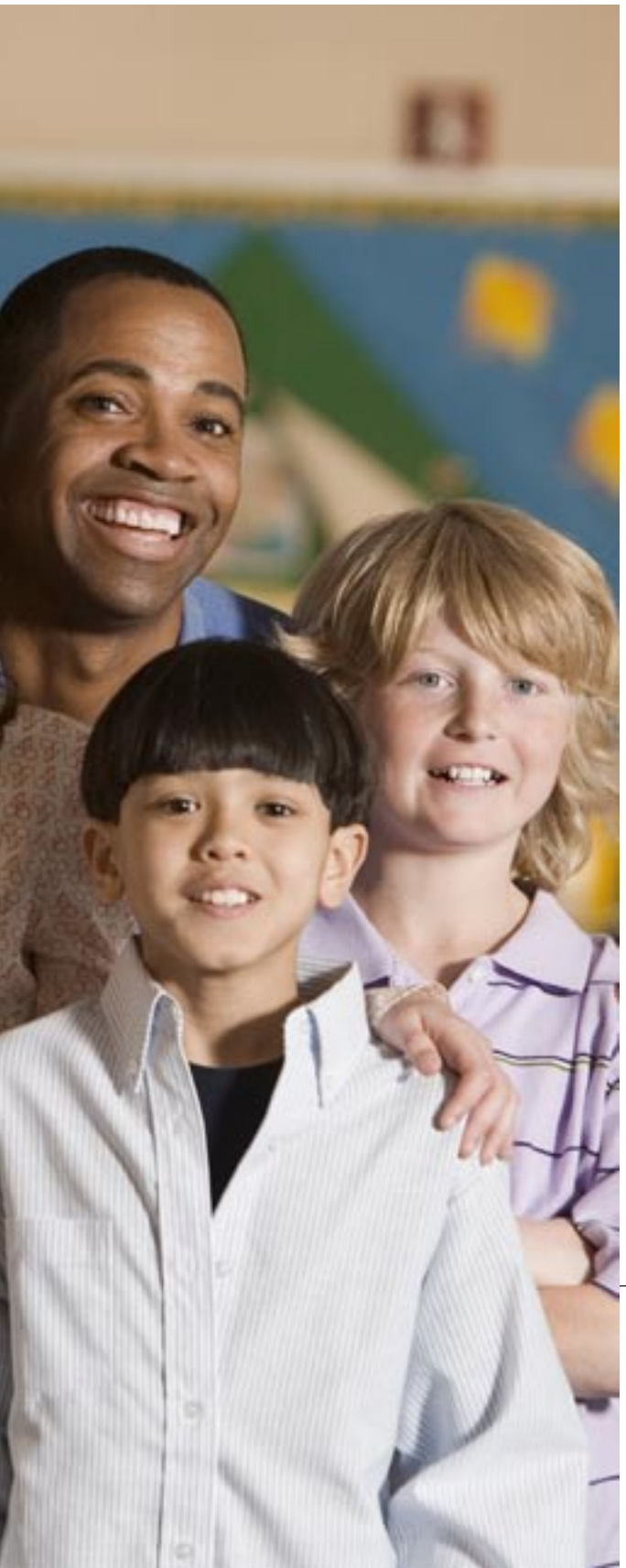

The status of state-level response to intervention policies and procedures in the West Region states and five other states

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August 2009

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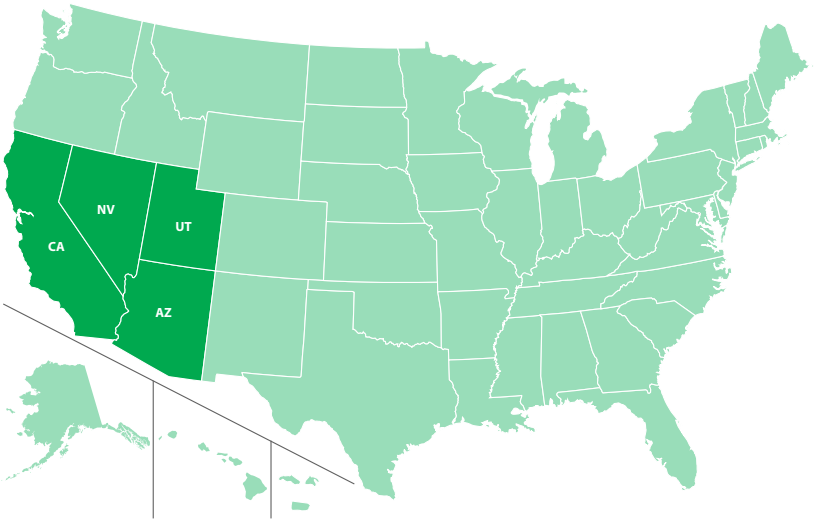

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August 2009

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Summary

REL 2009–No. 077

The status of state-level response to intervention policies and procedures in the West Region states and five other states

Response to intervention (RTI) can be both a system for providing early interventions to struggling students and a special education diagnostic tool for evaluating and identifying students with specific learning disabilities. Contributing to the very limited literature on state-level approaches, this report describes how nine states define and support RTI at the state level.

RTI programs are intended to provide evidence-based interventions that are aligned with individual student needs by identifying students requiring support early, monitoring their progress frequently, and providing more intensive interventions for students showing the least progress (National Association of State Directors of Special Education 2005).

Interest in RTI has been growing since the 2004 reauthorization of the federal special education law—the Individuals with Disabilities Education Improvement Act of 2004—explicitly recognized RTI as a diagnostic tool for evaluating and identifying students with specific learning disabilities. Today, all states are attempting to implement some form of RTI policy at the state level (Westat and Abt 2007).

Despite the growing attention, little has been published on the state-level approach to RTI. This report expands the limited research base by providing descriptive information on state-level RTI policies and procedures in nine states: Arizona, Arkansas, California, Illinois, Nevada, New Mexico, Pennsylvania, Utah, and Washington. While the focus is on West Region states (Arizona, California, Nevada, and Utah), RTI practices in five states outside the region (Arkansas, Illinois, New Mexico, Pennsylvania, and Washington) provide additional insights into state-level approaches to RTI.

The study addresses the following research questions:

- How is RTI defined in the nine study states, and how are RTI efforts supported at the state level?
- What considerations do state respondents report about developing state RTI policies and procedures, and how have their states addressed them?

To address these questions, information was reviewed from state technical assistance documents and materials relating to RTI, and phone interviews were conducted with a key

administrator in each state from the office overseeing RTI.

Several key findings emerged from the analysis of this information:

- Respondents from all nine states described RTI in terms that extended its application beyond special education. RTI was viewed as an overarching conceptual framework guiding the state's overall school improvement process for all students.

- While two of the nine states mandated the use of RTI in identifying students with specific learning disabilities for special education services, the other seven states were more permissive in orientation.

- Respondents from all nine states cited the importance of establishing buy-in and ownership of RTI by general education.

- Respondents from seven states indicated that the general education division had either taken charge of RTI at the state level or held joint responsibility with the special education division.

- Respondents from all nine states indicated that their state provided support for RTI implementation at the local level, with support varying across states from providing fiscal resources or technical assistance to establishing state support networks, training, and collaborative activities with institutions of higher education.

- While respondents from all nine states mentioned the importance of evaluating RTI, only three states have conducted implementation and outcome studies of pilot programs, and two others reported specific plans for future evaluation.

- State documents and respondents from six states cited the importance of implementing RTI with fidelity at the local level.

- Respondents from six states expressed concern about their state's personnel capacity and leadership to fully implement and support RTI at the state level.

- Respondents from four states also remarked on the limited research on evidence-based interventions associated with RTI in specific circumstances, such as implementation at the high school level.

- Respondents from four states mentioned concerns about the supplemental fiscal resources needed to carry out RTI.

- Respondents from four states remarked on the importance of understanding and incorporating the needs of demographically and geographically diverse student populations when supporting districts in implementing RTI.

- Respondents from four states discussed the importance of establishing state-level policies or guidance on RTI at an appropriate pace; however, respondents from two states felt that the state should have rolled out information faster, while respondents from two other states expressed concern about doing it too quickly.

Despite a generally broad vision of RTI, most respondents in this study indicated that full

RTI implementation was occurring in only a few schools and districts in their state. At the time of the study, California was still developing its model, and Utah's official RTI framework across all subjects was still in development, with only its tiered reading model having been adopted by the state board of education. Illinois and New Mexico had mandates in place for statewide implementation of their RTI frameworks over the next few years, but respondents noted that much work remained to achieve this. And while Arizona's rollout of RTI appeared to be highly structured, the state respondent explained that only one district had received approval to use RTI as an alternative to the traditional model (IQ discrepancy) for identifying students with specific learning disabilities.

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WHY THIS STUDY?

This report describes how nine states—the four states of the West Region and five additional states—define and support response to intervention (RTI) policies at the state level (see appendix A for profiles of state approaches to RTI). RTI programs are intended to provide evidence-based interventions aligned with individual students' needs by identifying students requiring support early, monitoring their progress frequently, and providing more intensive interventions to students showing the least progress (National Association of State Directors of Special Education 2005; Vaughn and Fuchs 2003).

All 50 states are implementing some form of RTI policy (Westat and Abt Associates 2007). Much of this growing interest (see, for example, D. Fuchs and Deshler 2008; D. Fuchs et al. 2003; Samuels 2008) emerged when the 2004 reauthorization of the federal special education law—the Individuals with Disabilities Education Improvement Act of 2004 (IDEA)—explicitly recognized RTI as a diagnostic tool for evaluating and identifying students with specific learning disabilities (see box 1 for definitions of key terms).[1] Before this change states had used the IQ-discrepancy model, which assesses the difference between a student's intelligence as measured by intelligence tests and performance on achievement (norm-referenced) tests (IDEA Partnership at the National Association of State Directors of Special Education 2007). The 2004 IDEA prohibited states from requiring local education agencies to "take into consideration whether a child has a severe discrepancy between achievement and intellectual ability" and further mandated states to permit the "use of a process that determines if the child responds to scientific, research-based intervention as a part of the evaluation procedures" (Individuals with Disabilities Education Improvement Act of 2004, section 614(b)6). In addition, monitoring student progress, a key component of the RTI process, is included in the No Child Left Behind Act of 2001 as a part of efforts to improve achievement for all students.

BOX 1

Definition of key terms

Adequate yearly progress. A statewide accountability system mandated by the No Child Left Behind Act of 2001 that requires each state to ensure that all schools and districts make adequate yearly progress toward universal student proficiency as defined by states and approved by the U.S. Department of Education.

Criterion-referenced assessment. A measure of what a student understands, knows, or can accomplish relative to a specific age- or grade-level performance standard. It does not compare students with other students.

Differentiated instruction. Tailoring the curriculum, teaching environments, and practices to meet each student's needs, based on interests, readiness level, and responsiveness to the standard core curriculum.

Disproportionality. The over- or under-representation of racially, culturally, ethnically, or linguistically diverse groups of students in special education, restrictive learning environments, or school disciplinary actions relative to other students.

Early intervention services. Services to assist students who manifest risk for poor learning outcomes but have not been identified as needing special education or related services.

Fidelity of implementation. The accurate and consistent provision of instruction according to research findings or developers' specifications.

IQ-discrepancy model. An assessment that measures the difference between scores on a norm-referenced intelligence test and a norm-referenced achievement test to determine special education status.

Intensive intervention. Academic or behavioral interventions with increased intensity (length, frequency, and duration of implementation) for students who fail to respond to less intensive forms of instruction.

Norm-referenced assessment. An assessment that compares a student's performance with that of an appropriate peer group.

Problem-solving approach. See box 3.

Progress monitoring. Assessing students' academic performance to quantify their rate of improvement or responsiveness to instruction and to evaluate the effectiveness of instruction. It can be implemented with individual students or an entire class.

Specific learning disability. A learning disability that applies when a child does not achieve adequately for his or her age or meet state-approved grade-level standards in one or more identified areas (oral expression, listening comprehension, written expression, basic reading skill, reading fluency skills, reading comprehension, mathematics calculation, and mathematics problem solving) when provided with learning experiences and instruction appropriate for the child's age or in accord with state-approved grade-level standards (Individuals with Disabilities Education Improvement Act 2004).

Standard protocol approach. See box 3.

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

Universal screening. Usually the first stage in a screening process to identify students at risk or who may be at risk for poor learning outcomes. Tests are typically brief, conducted for all students in a grade, and followed by additional testing or short-term progress monitoring to corroborate findings.

Source: National Center on Response to Intervention (n.d.); IDEA Partnership at the National Association of State Directors of Special Education (2007).

The context of response to intervention

While the mention of RTI in the IDEA places it in the special education domain, the term also refers to a framework that addresses reforming general education and improving the performance of all students through preventive academic and behavioral interventions (D. Fuchs and Fuchs 2006). RTI, therefore, has multiple purposes—as a diagnostic tool for evaluating and identifying students with specific learning disabilities and as a service delivery system for providing early interventions to struggling students. Both purposes aim to identify and address students' learning needs.

Both as a diagnostic tool and a service delivery system, RTI is grounded in two fundamental elements: continual monitoring of student progress (D. Fuchs and Fuchs 2007; L.S. Fuchs, Fuchs, and Compton 2004) and multiple tiers of increasingly intensive instruction (D. Fuchs and Fuchs 2006; D. Fuchs et al. 2008; L.S. Fuchs et al. 2005; Vaughn and Fuchs 2003). When general education (tier 1) is found to be ineffective for some students, they receive an intervention (tier 2), and their progress continues to be monitored. The intervention may be modified through additional tiers, depending on the student's progress. When RTI is used to determine eligibility for special education, data on a student's lack of response to interventions are used to diagnose a possible disability (L.S. Fuchs et al. 2005; L.S. Fuchs and Vaughn 2005; D. Fuchs, Fuchs, and Compton 2004).

The idea of RTI is not entirely new. According to D. Fuchs et al. (2003), previous approaches were similar to RTI in their focus on supporting teacher efforts to intervene with struggling students before referring them for special education services. Early large-scale efforts of this type included Ohio's intervention-based assessment (1992/93) and Pennsylvania's instructional support teams (1990). In some locations this approach evolved to encompass both early intervention and eligibility determination for special education. Early implementers of this dual approach were the Heartland Area Educational Agency in Iowa in 1992 and Minneapolis Public Schools in 1993 (D. Fuchs et al. 2003).

More recently, Compton et al. (2006) have argued that data from progress monitoring can help educators identify students who need more intensive instruction and that the more frequent the progress monitoring, the quicker such students may be identified for more appropriate instruction. Since the No Child Left Behind Act of 2001 many school districts have reported using an RTI process to improve student achievement (California Department of Education 2006).

The growing interest in RTI has spawned a new body of literature (see Griffiths et al. 2007). Topics range from conceptual frameworks and types of RTI models (such as D. Fuchs and Fuchs 2006; D. Fuchs et al. 2003) to strategies for implementing RTI in schools and classrooms (see, for example, D. Fuchs and Fuchs 2007b).

While the mention of RTI in federal legislation places it in the special education domain, the term also refers to a framework that addresses reforming general education and improving the performance of all students

Research has also focused on certain larger scale implementation efforts, though without describing state-level approaches. For example, Lau et al. (2006) report how Minneapolis Public Schools implemented a model that included an expanded role for school psychologists to design more appropriate interventions for struggling students. Ikeda et al. (1996) describe the efforts to align the special education and general education policies in the Heartland Education Agency's approach. Researchers have also explored scaling up research-based practices (Denton, Vaughn, and Fletcher 2003; King-Sears et al. 2004; Gerber 2005).

Proponents of RTI models assert that it is a better alternative to the IQ-discrepancy model for identifying students with disabilities. However, critics are concerned with implementation problems, including the lack of well trained teaching and support staff able to interpret student progress data, identify appropriate interventions, and teach the interventions with the fidelity needed to make the process better than the current system (Gerber 2005; Hale et al. 2006). Gerber (2005) also suggests that the costs of training instructional staff in these areas are especially high. Others argue that not enough is known about how to implement RTI in secondary schools to make it an effective statewide policy (Samuels 2008).

Still, other critics suggest that some struggling students do not need additional instruction but rather instruction of a different type (Hale et al. 2006). And some posit that students who need special education services may not receive them if increasingly intensive interventions enable them to attain the minimal improvement necessary to

Many states are pursuing RTI as a model for improving student achievement overall and for more effectively diagnosing students with specific learning disabilities

avoid being identified for further intervention (D. Fuchs, Fuchs, and Compton 2004b). Additionally, critics have expressed concerns about using RTI to identify specific learning disabilities, given the lack of a solid research base (McBride, Dumont, and Willis 2004; Scruggs and Mastropieri 2003).

State-level studies of response to intervention

While the debate continues, many states are pursuing RTI as a model for improving student achievement overall and for more effectively diagnosing students with specific learning disabilities. However, relatively little has been published on state-level RTI policies and procedures (see Sawyer, Holland, and Detgen 2008). And the literature that has been published is mainly opinion pieces and policy recommendations and not research based.

Among the limited body of state-level studies, two articles, both published before the 2004 reauthorization of the IDEA, discuss state practices and policies for identifying students with specific learning disabilities (Ahearn 2003; Reschly and Hosp 2004). Ahearn (2003) finds considerable variation in the procedures that states use to identify students with specific learning disabilities, with some states allowing multiple approaches. Reschly and Hosp (2004), based on a survey of state education agency staff, find that while nearly all states require using an IQ-discrepancy model to identify specific learning disabilities, states will need to supplement or replace this approach with new requirements involving RTI and problem-solving models in coming years.

Additionally, Zirkel and Krohn (2008) categorize state laws by whether they use RTI in identifying students with specific learning disabilities, based on survey data from state directors of special education. As of October 2007, a year after IDEA regulations went into effect, the authors found that 78 percent (or 36 states) of 46 surveyed states had adopted a permissive approach, allowing use of the traditional IQ-discrepancy model along with an RTI or other method for identifying students with specific learning disabilities. Only six states (Colorado, Delaware, Florida, Georgia, Indiana, and West Virginia) had passed or proposed legislation requiring RTI and prohibiting the IQ-discrepancy model.

Looking specifically at research on state RTI efforts, research on Pennsylvania's implementation of instructional support teams (which share many characteristics with RTI) suggests that the widespread adoption of the model was due in part to the state's regulated mandate for the instructional support teams and its technical assistance and administrative support for the policy (Kovaleski and Glew 2006; Kovaleski 2002). Ohio implemented a similar statewide intervention-based assessment model, with multidisciplinary teams responsible for using problem-solving methods to determine how best to support struggling students (Telzrow, McNamara, and Hollinger 2000; McNamara and Hollinger 2003).

More recently, Regional Educational Laboratory Southeast released a report that examines state RTI policies and procedures in Alabama, Florida, Georgia, Mississippi, North Carolina, and South Carolina (Sawyer, Holland, and Detgen 2008). The study found that all six states were either already implementing or planning to implement state RTI policies. Four of the states—Florida, Georgia, Mississippi, North Carolina—had already specified their RTI models, with all four adopting the problem-solving approach. However, while some key components were determined at the state level in these four states, many decisions on procedures and interventions were delegated to local authorities.

In summary, there is limited research on state-level RTI policies and procedures. Published studies do not focus on the considerations that state administrators face when designing a state-level RTI approach—perhaps because most states are still in the early stages of implementation.

When the National Technical Assistance and Dissemination Center on Response to Intervention (2008) reviewed state plans in preparation for a summit in 2007, they found that three-quarters of the states and territories were in the early stages of implementation, and states reported that it would take several years to complete the rollout of their RTI initiatives. Thus, information detailing states' progress in this area appears particularly timely.

This descriptive report contributes to the limited body of work on state-level RTI approaches, drawing on state-level interviews and reviews of state materials across nine states (see box 2 and appendix B on data sources). Information on

BOX 2

Data sources and selection

Data sources. Although intended for the West Region states, the study included states outside the region to provide more detail on what choices and challenges states may face when designing a state-level approach to RTI. Nine states participated: the four West Region states (Arizona, California, Nevada, and Utah) and five additional states (Arkansas, Illinois, New Mexico, Pennsylvania, and Washington). To select the non-West Region states, technical assistance documents were examined from the state education agency web sites of the other 46 states; candidates were narrowed to those with at least one guidance document and one form or tool related to RTI. Of the 23 states that met these criteria, 4 were selected that were similar in population size to the West Region states. One state (Florida) declined to participate, having recently participated in a similar study. Illinois—the next largest in size—was selected as a replacement. Pennsylvania was purposefully selected because of its long history of using instructional support teams, which share many characteristics with the RTI model.

This descriptive study relied on two data sources:

- *Phone interviews with a key administrator from the state office overseeing RTI in each state.* In two states (California and Nevada) some interview questions were referred to other state respondents. Respondents included state directors and associate directors of special education as well as administrators leading the state's RTI efforts (for example, curriculum and instruction division, school and district improvement offices). All respondents were advised that state names would be used in the final public report and received report drafts to review for factual accuracy. In eight states respondents (89 percent of total) participated in a reliability check of the data by reviewing the report or their state profile.

- *Review of state technical assistance documents and materials relating to RTI.* Materials were collected from state education agency web sites and respondents. Materials included state legislation, nonregulatory guidance, training presentations, technical assistance materials such as checklists and self-assessments, and state-sponsored RTI evaluations.

Data limitations. There are some limitations to the data used for this report. First, only one respondent per state was interviewed (with the exceptions noted above). Respondents' perspective may vary from that of other administrators, and self-reported data may be biased. Second, the small number of respondents also limits external validity. Third, this work provides a state-level perspective and does not examine variations in implementation of RTI policies and programs at the district and school levels. Fourth, because of the nature of the research questions, only states that had committed to developing and implementing a state-level approach to RTI were examined, and so the perspectives of states that might not want to pursue such a policy are not represented. Finally, some of the components described in this report may have changed by the time of publication because many states were developing additional components of their state-level approach to RTI at the time of this study.

Despite these limitations, this report provides useful information as one of only two studies to describe approaches to state-level RTI policies and practices. As such, it can be of importance to state education agency staff responsible for designing or refining their state's RTI policies.

See appendix B for additional details on the study methodology.

states' RTI policies is especially relevant for the West Region states of Arizona, California, Nevada, and Utah. While Arizona has an established plan for statewide implementation of RTI and provides considerable technical assistance to schools and districts, the other West Region states are still developing their state initiatives and could benefit from the information in this report. With the research on issues specifically related to state-level implementation of RTI so limited, particularly that pertaining to the West Region states, this report will enhance understanding of state-level approaches to RTI. A strong body of research suggests the importance of understanding the details of implementation in education's systemic change efforts (for example, Fixsen et al. 2005; Berman and McLaughlin 1976). This report will therefore inform West Region states' varying approaches to and considerations of policies, regulations, and other issues around RTI.

In addition, while the report focuses on state-level RTI in the West Region states, it also draws on RTI policies and practices in five states outside the region (Arkansas, Illinois, New Mexico, Pennsylvania, and Washington) to show what is occurring in other states that have already focused on a state-level approach to RTI. These five states have already made the decision to develop a state-level approach to RTI and therefore offer richer details about the considerations states face when designing RTI policies and practices.

This study is designed to inform and support state policymakers and administrators in developing and implementing state-level RTI policies and practices. The study addresses two research questions:

- How is response to intervention (RTI) defined in the nine study states, and how are RTI efforts supported at the state level?
- What considerations do state respondents report about developing state RTI policies and procedures, and how have their states addressed them?

Respondents and documents from all nine states described RTI as an approach that changes how the state educates students, cutting across areas such as bilingual education, special education, and early childhood education

As RTI can apply to both special and general education, this study provides descriptive information on state policies and procedures for RTI, with the understanding that such policies touch on many other elements and systems in each state's overall education policy. The report presents what state administrators in nine states said about their RTI policies and what state documents disclosed about RTI policies and procedures (see box 2 and appendix B on data sources). The report concludes with considerations that state administrators report they have faced with RTI at the state level and how their state has addressed them. Information and comments from the interviewed state administrators do not necessarily reflect an official state position; rather, they represent the perspectives of staff with responsibility for oversight of RTI at the state level.

HOW HAVE STATES DEFINED RESPONSE TO INTERVENTION?

Respondents and documents from all nine states described RTI as an approach that changes how the state educates students, cutting across areas such as bilingual education, special education, and early childhood education. Respondents reported that RTI served two main objectives: to improve student achievement and, secondarily, to identify students with specific learning disabilities. For example, New Mexico's respondent noted:

> We see RTI as basically a school systems issue. We're looking at it as the overall framework for student achievement, positive behavioral support, and school improvement. RTI has a specific learning disability component, but it is just a small part of the overall RTI effort, which focuses on school improvement and student achievement.

Two states deliberately excluded the term *RTI* in naming their initiatives, according to respondents,

to avoid its association with special education and to foster broader application. For instance, Arkansas's RTI effort is called Closing the Achievement Gap.

In addition to taking a broad view of RTI as a foundation for improving student achievement, six state respondents noted the importance of establishing a solid foundation of core instruction and interventions before using RTI for identifying students with specific learning disabilities (regardless of how tightly the states regulated the use of RTI).

Key components of the response to intervention framework

RTI frameworks can vary by targeted grade spans and subjects and by how states define its core characteristics. Because California is still developing its model, this section examines the frameworks of the remaining eight states. And because Utah's official RTI framework across all subjects is still in development, only the state's tiered reading model, already adopted by the state board of education as the official literacy framework, is included in this analysis.

Grade levels included. Respondents in seven states (Arkansas, Illinois, Nevada, New Mexico, Pennsylvania, Utah, and Washington) described their state RTI framework as applicable to all students in grades K–12. In addition, the Washington respondent noted that the state is working to extend its RTI approach to prekindergarten. Arizona's respondent described the state's focus as limited to prekindergarten through grade 8.

Subjects targeted. The RTI framework applies to multiple core subjects in seven states; Utah's tiered model focuses on reading, with a tiered math model in development. State documents and interviews indicate that Arkansas's framework pertains to reading, literacy, math, and science, while Arizona's includes reading, math, and writing. All state RTI models incorporate a focus on behavior as well.

Common components. In addition to the grade and subjects targeted for RTI, the review of state documents revealed considerable similarities in the core RTI components across the eight states (table 1).

Universal screening requirements. A common component in six states (Arizona, Nevada, New Mexico, Pennsylvania, Utah, and Washington) was the use of universal screening to identify students who may be at risk for poor learning outcomes. Three of the

TABLE 1
Overview of key framework components of state-level approaches to response to intervention, by state

Framework	Arizona	Arkansas	Illinois	Nevada	New Mexico	Pennsylvania	Utah[a]	Washington
Grade levels	PreK–8	K–12	K–12	K–12	K–12	K–12	K–12	K–12
Subjects targeted	Core subjects + behavior	Core subjects + behavior	Core subjects + behavior	Core subjects + behavior	Core subjects + behavior	Core subjects + behavior	Reading + behavior	Core subjects + behavior
Common components								
Universal screening	✔			✔	✔	✔	✔	✔
Continual progress monitoring	✔	✔	✔	✔	✔	✔	✔	✔
Tiered model	✔	✔	✔	✔	✔	✔	✔	✔

Note: California is still developing its model and so is not included in this part of the analysis.

a. Utah is developing its official state RTI framework; this table reflects the state's tiered reading model only.

Source: Authors' analysis of state documents and interviews with state education agency respondents; see box 2 and appendixes B–D for details.

In addition to the grade and subjects targeted for RTI, the review of state documents revealed considerable similarities in the core RTI components: universal screening, progress monitoring, and tiered intervention

six states (Arizona, New Mexico, and Washington) specified that students were to be screened three times a year. New Mexico's guidance document further noted that the screening data could include data from short-cycle assessments, New Mexico's Standards-Based Assessments, and Curriculum-Based Measures (New Mexico Public Education Department 2006).

Frequent or continual progress monitoring using individual student data. After the universal screening assessment, student progress (either for specific students or for a class as a whole) is monitored more frequently to track the rate of improvement, determine what interventions would best address the student needs, and evaluate the effectiveness of interventions and instruction. All eight states considered for this part of the analysis identify continual progress monitoring as a core component. New Mexico, Pennsylvania, Utah, and Washington provide guidance on the frequency of progress monitoring at a given tier (see next section for details), with New Mexico's guidance document stipulating that "robust progress monitoring procedures such as graphing results and using trend lines are *required* in order to apply consistent decision rules" (New Mexico Public Education Department 2006, emphasis in original). Nevada's documents also discuss the importance of specifying the "decision rules" or specific cutscores on student assessments for the different tiers.

Tiered model of intervention. A core concept of the RTI process is a multitiered structure of increasingly intensive interventions for a limited number of students. Therefore, in all eight states with specific guidance on RTI, students identified as in need of additional support (either academic or behavioral) receive increasingly intensive interventions. State materials for Arizona, Illinois, Nevada, New Mexico, Pennsylvania, Utah, and Washington presented this as a pyramid, with the percentage of targeted students declining as the intensity of the interventions increases. Arkansas's documentation presented the process as interlocking circles.

The following describes how the three tiers are defined across the eight states.

- *Tier I* consists of instruction for all students. Also referred to as "foundation," "core," "universal," or "primary" instruction, it includes periodic assessments. Pennsylvania materials described this as "high quality, effective instruction designed to engage and challenge students" and included "high expectations" as a dimension of this tier (Pennsylvania Department of Education 2008). Materials for Arkansas, New Mexico, and Utah explicitly identified the "interventionist" at this tier as the general education classroom teacher. In the New Mexico model tier I instruction has two levels of intensity, with students at the second level given more opportunities to respond during core instruction and teachers organizing small groups for specific practice.

- *Tier II* interventions, designed to supplement the core instruction, are provided to a subset of students based on their performance in tier I. Tier II interventions, also referred to as "strategic," "targeted," "secondary," or "supplemental," typically provide additional services (either inside or outside the classroom) for students who are struggling in tier I. Based on the state document review, states vary in the percentage of students (5–30 percent) expected to be served at this level.

  State documents indicated that interventions at this stage generally consist of small group instruction for a finite period of time. Within New Mexico's tier II, there are two levels of intervention intensity. At the first level within tier II, students receive small-group instruction (three students or fewer) for a minimum of four weeks, with weekly progress monitoring using curriculum-based measures. Every four weeks interventions are revised or discontinued based on student progress.

BOX 3

What is the difference between a standard treatment protocol and a problem-solving approach?

The standard treatment protocol and the problem-solving model are two generally accepted approaches to implementing response to intervention (RTI; National Association of State Directors of Special Education 2005). While the RTI components (for example, universal screening and tiered model) look similar under both, the approaches vary in how interventions are implemented.

In the standard treatment protocol one standard intervention is given for a fixed duration to a group of students with similar needs. This approach assumes that providing the same research-based intervention to similarly grouped students introduces a level of quality control (National Association of State Directors of Special Education 2005).

In the problem-solving model a team of practitioners identifies and evaluates problems for an individual student and designs and implements flexible interventions to meet the student's needs. It typically has four stages: problem identification, problem analysis, plan implementation, and plan evaluation. This model assumes that no one intervention is effective for all students (National Association of State Directors of Special Education 2005).

The two approaches are not necessarily mutually exclusive; a state could advise that both types of interventions be provided within each tier, based on student needs (National Joint Committee on Learning Disabilities 2005).

At the second level within tier II, instruction may be individualized. Utah's tiered reading model requires that K–6 students receive a minimum of 30–60 minutes of additional instruction daily in flexible groups of three to five students (or individual instruction) in the regular classroom or other appropriate setting, provided by a highly qualified classroom teacher or a specialist (such as a reading specialist or special education teacher) and monitored biweekly (Utah State Office of Education 2007a). In Washington, groups of three to six students receive 30–60 minutes of instruction three to four times weekly over 9–12 weeks, with progress monitoring every two weeks (Middling 2008).

One focus in guidance in five states (Arkansas, Illinois, Nevada, Pennsylvania, and Washington) was on the two methods commonly used in RTI to provide additional supports and interventions: the standard protocol technique and the problem-solving approach (see box 3). While materials from Pennsylvania reference a standard protocol technique, the Pennsylvania respondent acknowledged that parts of the process may resemble a hybrid of the standard protocol technique and the problem-solving model. Likewise, Nevada and Washington materials cited the use of both the problem-solving approach and the standard protocol approach, while Arkansas and Illinois documents mentioned only the problem-solving model.

- At *tier III* more intensive interventions and progress monitoring are provided to fewer students, targeting 1–5 percent of the student population, according to state materials reviewed for this study. At this stage, students may either receive additional services within their general education classroom setting or be placed in a different instructional setting.

  Specific guidance from the states on intervention intensity varies, ranging from suggestions on whom to target (for example, individual students or a group of students) to the frequency of monitoring. Documents for Arizona and Arkansas specify that such interventions may target individual students (instead of small groups). In addition to small group instruction, Pennsylvania incorporates supplemental instructional materials and additional one on one tutoring by specialists as part of the school day for a 10–20-week period with weekly progress monitoring (Pennsylvania Department of Education 2008). Materials

The reported nature of the state role ranged from mandating use of RTI (two states) to the more permissive approach of encouraging the use of RTI at the local level (seven states)

for Utah's tiered reading model describe a special educator or reading specialist or literacy coach providing 60 minutes of instruction daily to groups of two or three students (or individual students) in K–6, with weekly monitoring (Utah State Office of Education 2007a). Washington's interventions feature smaller groups of no more than three students, with weekly monitoring and with instruction that may last longer than the 9–12 weeks specified in tier II (Middling 2008).

Referrals to special education. State documentation varied on which tier is designated for referrals to special education. New Mexico is the only study state whose documents explicitly identify the tier III intervention as a special education intervention, implemented as part of the student's individualized education program. Materials for three states (Illinois, Pennsylvania, and Washington) note that referral for special education may be considered if the student is not responsive to the tier III interventions (according to the Washington respondent, the decision is made after two intervals of tier III interventions). Nevada's guidance suggests that referrals generally occur at some point in tier II, while state documents in Arkansas and Utah do not specify particular tiers. However, in six states (Arizona, Illinois, New Mexico, Nevada, Pennsylvania, and Utah) respondents or state materials noted that parental requests and referrals for special education evaluations can occur at any point. The Utah respondent remarked:

> It's very clear under IDEA that students can be referred at any time for special education evaluation, but you also want to work with parents to make sure that they're really involved in what's happening with tiered reading instruction and to allow time for interventions to take place.

Certain states shared other common components mentioned in state materials: parent involvement, professional development, differentiated instruction, and district leadership. Three states (Arizona, Nevada, and Pennsylvania) considered the role of parent involvement in RTI. For example, Arizona provided guidance on how and when parents should be involved in each tier (Arizona Department of Education 2007). Five states mentioned the use of ongoing professional development (Arizona, Arkansas, Nevada, New Mexico, and Utah). Respondents in two states (Nevada and Washington) discussed the use of differentiated instruction. Finally, material from Arkansas and Nevada identify leadership as a critical foundation of RTI. Nevada's plan included components such as the creation and communication of a district vision and the development and implementation of a district plan that specifies policies, procedures, and associated allocations of resources and professional development (Nevada Department of Education 2008).

Nature of state role in response to intervention

The reported nature of the state role ranged from mandating use of RTI in two states (Illinois and New Mexico) to the more permissive approach of encouraging the use of RTI at the local level (the other seven states; table 2).

State mandates. For the two states that require the use of RTI in some capacity, regulations on what is (or will be) required are fairly general. In Illinois, state documents indicate that districts must develop a plan by 2009 for implementation of RTI that specifies the resources to be committed and the state-level assistance (professional development, additional resources) needed. Illinois defined three components of RTI: use of a three-tiered model of school support that allocates resources to students in proportion to their needs, with more intense instruction and interventions as a student progresses through the tiers; use of a problem-solving method for decisionmaking; and use of a data-based system to inform instruction (Illinois State Board of Education 2008). By 2010/11 districts will be required to "implement the use of a process that determines how the child

TABLE 2
Overview of the state role in response to intervention (RTI), by state

Role	Arizona	Arkansas	California	Illinois	Nevada	New Mexico	Pennsylvania	Utah	Washington
Mandates RTI for identifying students with specific learning disabilities				✔		✔			
Assigns primary oversight to special education or general education office?	Jointly held between general and special education	Jointly held between general and special education	General education	Jointly held between general and special education	Special education	General education	General education	Special education	Jointly held between general and special education

Source: Authors' analysis of state documents and interviews with state education agency respondents; see box 2 and appendixes B–D for details.

responds to scientific, research-based interventions" as part of the evaluation procedure (Illinois State Board of Education n.d.). Furthermore, the Illinois state plan acknowledges that RTI can be used to evaluate and identify students with disabilities other than specific learning disabilities (Illinois State Board of Education 2008).[2]

New Mexico mandates that by July 2009 districts must use a "dual discrepancy" model (one that identifies students as having a learning disability if they have a discrepancy from their peers in both initial performance and performance over time) for K–3 students, using data collected through the RTI process in conjunction with the IQ-discrepancy approach. New Mexico's regulations also specify that schools must use a three-tiered model as a "proactive system for early intervention for students who demonstrate a need for educational support for learning" (New Mexico Public Education Department 2007a). As discussed, the first tier involves universal screening of students. Students identified as needing additional support for learning are then referred to the student assistance team at the tier II level. The student assistance team (which includes teachers, parents, and, as appropriate, other school staff) is responsible for developing research-based, individualized interventions using curriculum-based measures and for supporting general education teachers and students in the general education setting. For students who have not shown a significant and positive response to these interventions, tier III involves identification of students in need of special education services and development of an individualized education program (New Mexico Public Education Department 2007a).

Thus, neither Illinois nor New Mexico disallow the use of the IQ-discrepancy approach entirely for identifying students with specific learning disabilities. Illinois allows districts to use the IQ-discrepancy approach along with RTI, while New Mexico specifies that it be used in conjunction with the RTI process.

State encouragement. The remaining seven states reported permitting (but not mandating) districts to use RTI as long as they followed state requirements for identifying students with specific learning disabilities. The states in this group generally characterized their efforts as attempting to provide overarching guidance and support for local initiatives. For instance, according to the Arizona respondent, the state requires districts to submit a letter of assurance outlining their plans to use

RTI in identifying students with specific learning disabilities. While not all states explicitly noted their rationale for a more permissive approach, the Utah respondent explained the state's rationale for not mandating RTI for identifying students with specific learning disabilities: "The reason we put a permissive system in place is because, although we want to strongly encourage movement toward an RTI model for specific learning disability determination, we feel we have to have the 'I'—the interventions—in place before we can responsibly mandate that."

Evolving role of the state. Respondents from four states—Arkansas, California, Utah, and Washington—explicitly noted that their state's role was still in development or evolving. California and Utah were defining their state RTI framework. Although Utah adopted a tiered reading instruction model in 2007 that uses RTI concepts, the state is still developing an official RTI framework (the state released guidelines in 2008 for using RTI for identifying students with specific learning disabilities).

State oversight of response to intervention

Respondents described state oversight of RTI efforts as attempting to foster collaboration between special and general education offices, as well as to reflect broader ownership and application of RTI in general education (see table 2). However, while all state respondents described collaboration between general and special education state offices, states varied in which office was assigned primary responsibility for RTI.

Respondents described state oversight of RTI efforts as attempting to foster collaboration between special and general education offices, as well as to reflect broader ownership and application of RTI in general education, but states varied in which office was assigned primary responsibility for RTI

Leadership for RTI in general education division. Respondents in three of the nine states—California, New Mexico, and Pennsylvania—indicated that general education staff provided the primary leadership, while collaborating with the special education office. RTI efforts in Pennsylvania had initially been under the oversight of special education. However, the state respondent explained the need for the transition from special to general education:

> We have had to refocus training efforts to shift local thinking to viewing RTI as a general education piece. It makes it a lot easier that our materials and the people in front of local folks happen to be general education people presenting with special education.

In California, according to a state respondent, leadership for RTI rests with the deputy superintendent of curriculum and instruction, who oversees RTI for education generally, including special education.

Leadership for RTI in special education division. Nevada and Utah respondents reported having collaborative approaches to RTI efforts, with special education providing the initial leadership at the state level. The Utah respondent suggested that the lead role of special education was linked to its access to categorical funding sources that "our general education partners don't have" and "which carries with it a responsibility to provide professional development support."[3] Even so, the respondent remarked that the state was convening a collaborative team consisting of the special education director, Title I director, curriculum director, career technology director, and the director of educator quality to jointly lead the RTI effort.

Joint leadership for RTI. In four states—Arizona, Arkansas, Illinois, and Washington—respondents described special and general education departments as sharing responsibility. According to the Arkansas respondent, to guide the RTI process, the state draws on a steering committee under the oversight of general education that involves coordinators from several state agencies. However, while general education has primary leadership responsibility, the special education division heads oversight for the letters of approval that districts must submit when they use RTI for identifying students with specific learning disabilities. As

reported by the Illinois respondent, the Special Education and the Curriculum and Instruction Divisions provide joint leadership, with the goal of transitioning RTI entirely to general education. Similarly, the Washington respondent reported that the state was considering how to transition leadership to its Teaching and Learning Division, a general education office, noting that "the [IDEA] was the impetus for RTI; therefore, it came out of special education [first]."

Level of implementation in the state

No state respondent reported full implementation of RTI in schools across the state, and three state respondents noted that their states lacked—or were still collecting—data on district or school implementation.

It was difficult to ascertain the frequency of statewide use of RTI for identifying students with specific learning disabilities, and lack of data made it difficult to estimate the degree to which districts and schools used RTI as a general school improvement model. The respondent from Illinois, one of the states mandating RTI, estimated that roughly half the districts were using it in a "rudimentary" fashion ahead of the 2010/11 deadline. Six states reported pilot RTI programs in selected schools and districts (ranging from 7 schools in Pennsylvania to 55 schools in Washington).

WHAT SUPPORTS DO STATES PROVIDE?

All states, as reported through interviews or documents, described how they supported local efforts to implement RTI. This section describes the technical assistance and professional development opportunities that the states offer, some to specific sites.

For example, Illinois provided additional support to a limited number of sites identified as needing greater assistance based on a review of district RTI plans. As described by a state administrator, the goal of Illinois's support to these sites was to incorporate RTI into its "overall improvement planning, [so that] we have a better mechanism to review and comment and provide technical assistance for our districts that are struggling." In the three other states with pilot programs, participating schools and districts received additional technical assistance or funding.

All states, as reported through interviews or documents, described how they supported local efforts to implement RTI using fiscal support, technical assistance, state networks, training the trainers, and collaboration with institutions of higher education

Fiscal support

Respondents in six states—Arizona, Arkansas, Illinois, Nevada, Utah, and Washington—reported that the state education department used multiyear federal special education grants or IDEA discretionary money in support of RTI activities. For example, Arizona allocated such funds to more than 30 schools to support preK through grade 6 reading and math programs and provided grants of $3,000 to schools to support training expenses. Arkansas focused resources on positive behavior supports at the elementary level and literacy strategies at the elementary and secondary levels. Illinois's federal funds supported pilots to integrate RTI into K–3 literacy programs, while Nevada used federal funds to support more than 40 schools in scaling up, implementing, and sustaining an RTI team-consultation model. Utah and Washington used federal funds to create professional development modules to build local capacity.

Technical assistance

According to state documents, technical assistance for districts and schools was often provided through manuals, Q&A documents, and tools such as readiness checklists, templates for district plans, and forms to document the fidelity of implementation. In two states collaborative stakeholder committees or work groups developed technical assistance materials, defined essential framework components and guidance, crafted training modules and manuals, and identified professional

Respondents from four states reported that they have collaborated with higher education institutions to build the capacity of district and school staff to use RTI effectively

development needs in the field (such as implementing RTI in high schools and schools with substantial numbers of English language learner students, and identifying and using scientifically based interventions).

Technical assistance and professional development were disseminated in a variety of ways, such as through web sites, webcasts, DVDs and CDs, downloadable PowerPoint presentations, local presentations by state administrators, regular meetings of state and district staff, and demonstration sites modeling RTI practices.

State networks

As described by respondents, five states—California, Illinois, Pennsylvania, Utah, and Washington—have leveraged existing regional networks to support RTI implementation in schools and districts throughout the state. For example, Illinois has a network of four regional Alliance for School-based Problem-solving and Intervention Resources in Education (ASPIRE) centers, which conduct large-scale training, provide technical assistance to schools, and implement a coaching model to selected demonstration districts. The Pennsylvania Training and Technical Assistance Network (PaTTAN), with three regional offices that serve 29 intermediate units, attempts to build the capacity of intermediate unit and school personnel to improve student achievement. RTI consultants in each PaTTAN and intermediate unit site provide additional support and professional development to the schools and districts in their region. Washington provides support through its nine educational service districts, which provide an intensive five to seven days of training as well as materials to the member districts.

Training the trainers

To build statewide personnel capacity, three state respondents reported using a training the trainers approach in their state. The Arkansas Department of Education, for example, collaborated with the University of Central Arkansas and the University of Kansas Center for Research on Learning to train teachers and administrators in the research-based strategic instruction model through the Arkansas Adolescent Literacy Intervention Project. This project addresses the tiered instructional components of RTI specific to literacy at the secondary school level, training participants to become certified strategic instruction model professional developers.[4] According to the state respondent, one goal of the program is to produce local trainers of the strategic instruction model and thus to avoid the need for out of state trainers. The respondent also described another state program to train school psychologists and counselors on the state's positive behavioral support model. Participants meet twice yearly for training and support to assist schools and districts in using research-based strategies that are relevant to the state's positive behavioral support model.

The Illinois respondent noted that school improvement coaches receive supplemental training in RTI, scientifically based interventions, and data, which they then use in supporting their districts. New Mexico's respondent explained how the state created a "train the trainers" academy to provide professional development to designated district staff through four-day training sessions on the core elements of the RTI framework and the role of the student assistance teams. These trainers are then responsible for training and supporting school-based student assistance teams in their district.

Collaboration with institutions of higher education

Respondents from four states—Arkansas, Illinois, Nevada, and Pennsylvania—reported that they have collaborated with higher education institutions to build the capacity of district and school staff to use RTI effectively. Arkansas has collaborated with universities to implement a training module for school districts. The Arkansas

respondent also noted that the state has worked with other state universities to provide professional development in the strategic instruction model to faculty. Professors can then instruct their preservice students in this approach. Similarly, an objective of Illinois's ASPIRE network is to integrate RTI professional development into general and special education preservice and graduate curricula.

Nevada has worked with the University of Maryland to train school and district staff in the instructional consultation team model, and now more than 40 schools across 12 of their 17 school districts apply this model. The model encourages the use of data to monitor student progress, collaboration among instructional staff to develop effective plans for helping struggling students, and use of research-based interventions. Pennsylvania has two university consultants working with its RTI core team to build state and local capacity, develop training materials, and conduct research on RTI implementation across the state.

WHAT CONSIDERATIONS DO STATE RESPONDENTS REPORT ABOUT DEVELOPING STATE RTI POLICIES AND PROCEDURES, AND HOW HAVE THEIR STATES ADDRESSED THEM?

Conversations with state education agency respondents about issues the state considered when implementing and supporting RTI at the state level revealed issues that may be informative for other states that are developing or refining their own state-level approach.

All respondents mentioned that RTI was an evolving process and indicated that their state was continuing to make progress. Some of the concerns reported about RTI pertain to other state education policies and initiatives as well. And while state respondents highlighted as accomplishments progress in training and technical assistance, cross-discipline collaborative efforts, and framing RTI as a general education initiative (as opposed to one exclusively for identifying students with specific learning disabilities), they also acknowledged some of these areas as ongoing concerns (table 3).

TABLE 3
Overview of state-level response to intervention (RTI) considerations, by state

Implementation area	Arizona	Arkansas	California	Illinois	Nevada	New Mexico	Pennsylvania	Utah	Washington
Planning the timing of rollout		✔	✔	✔			✔		
Promoting general education ownership	✔	✔	✔	✔	✔	✔	✔	✔	✔
Examining fidelity of implementation	✔	✔			✔	✔	✔		✔
Evaluating RTI	✔	✔	✔	✔	✔	✔	✔	✔	✔
Ensuring personnel capacity	✔	✔			✔	✔		✔	✔
Working with limited scientifically based research			✔	✔	✔		✔		
Coordinating fiscal resources			✔	✔	✔			✔	
Incorporating student diversity	✔		✔	✔		✔			

Source: Authors' analysis of state documents and interviews with state education agency respondents; see box 2 and appendixes B–D for details.

Planning the timing of rollout

Arkansas, California, Illinois, and Pennsylvania respondents discussed the importance of establishing at an appropriate pace state-level policies or guidance for implementing RTI. While timing can affect the success of many education reforms, respondents noted specific challenges in their RTI experience.

Unlike some state-led reforms that cannot take shape without state-led approval for each district, RTI has often been implemented by districts without common state parameters or guidelines. For example, the Arkansas respondent noted the need to establish a quicker, more structured timeline:

> I would have preferred a faster rollout so districts wouldn't have gone off and formed their own models, but they couldn't wait on us. It takes a while to sell it to general education and develop plans for rollout and funding. The state is still behind, and locals have gone off tangentially. We can't tell them to stop what they're doing, since our model is not mandated, but we are trying to look at what they are doing and identify weaknesses and guide them. The timing put us behind, not because we didn't start early enough but because the wheels move slowly.

The Pennsylvania respondent also recommended that other states scale up as "quickly and holistically as possible" or run the risk of districts moving forward independently.

Conversely, the Illinois respondent believed that the timeline for developing the state and district plans for implementing RTI felt "rushed." A California respondent noted that the state was resisting pressure to roll out more quickly in order to build the foundations needed for successful statewide implementation: "It's a challenge to diffuse some of the frustration because we're not going to come out with something right away that tells people what to do and how to do it."

For all nine states, respondents' commonly cited consideration was trying to establish general education staff buy in and ownership of RTI

Promoting ownership by general education

For all nine states, respondents' commonly cited consideration was trying to establish general education staff buy-in and ownership of RTI. Respondents in all nine states recognized the applicability and usefulness of RTI for all students (not just those with possible disabilities) and its potential to enhance school performance. Consequently, respondents viewed RTI as an overarching conceptual framework that can be applied generally to the state's school improvement efforts. For example, the Arkansas respondent explained:

> The first challenge is getting locals to embrace the idea that everyone is responsible for the education of all students, and you can't just refer a child to special education as soon as they have a problem. We need to improve what the state calls basic instruction; it's the foundation for all students.

One California respondent noted that much of the information at the national level comes from special education sources, perpetuating the general education–special education dichotomy. Additionally, respondents from Pennsylvania and Washington remarked that state efforts to promote RTI as a broader school improvement strategy might have been further advanced had RTI leadership initially come from general education.

Respondents from six states mentioned specific methods to address this issue. As discussed in the section on state oversight, respondents from Arizona, Arkansas, Illinois, and Washington described attempting to promote broader based collaboration at the local level by modeling it at the state level. Arizona requires that local RTI teams include general education staff. A California respondent described "filtering" available information for distribution to ensure that it does not have a special education emphasis. The Illinois respondent described the involvement of multiple

offices in leading training sessions: "We [general and special education state staff] try to present together, so people can see it's a collaboration."

Additionally, respondents from Illinois, Nevada, and Pennsylvania described how they were using a stakeholder committee or work group, with constituents beyond state-level staff, to guide the statewide vision, secure widespread buy-in, and develop state support. The New Mexico respondent noted that the state was convening such a group. Membership for such groups included state education agency representatives as well as local constituents, such as staff and administrators from schools, districts, and regional units.

Another mechanism to encourage general education ownership was to incorporate RTI into existing school and district systems. A Nevada respondent described using existing school improvement systems to roll out RTI. For example, the state's curriculum audit—required for low-performing districts—includes an evaluation of whether the district has a school-level intervention system in place. A state respondent explained, "We're trying to push it into our general education systems when we see the opportunity."

Examining fidelity of implementation

Documents from six states (Arizona, Arkansas, Nevada, New Mexico, Pennsylvania, and Washington) emphasize the importance of ensuring that schools and districts maintain fidelity to the RTI process. These states insist that students be appropriately screened and monitored, within the expected time frame, and that instructional interventions be provided as designed and for the expected duration.

This sentiment was echoed by respondents from Arkansas, Nevada, and Pennsylvania, who noted that achieving consistency across districts was a particular concern. Both Arkansas and Pennsylvania respondents noted the culture of local control, with one explaining, "Any time you are implementing in a state where local control is the way of life here, you're always challenged by those who will run ahead of what we know and who will implement minus a level of integrity that we want." Specifically for Arkansas, as described by the state respondent, "The state often adopts best practices and guidance, but we are very much a local-control state. It's hard to get something into the statutes and to mandate a particular model. Instead we try to 'sell' it and provide incentives for its use." Additionally, a Nevada respondent attributed some of the inconsistency to resistance at the local level to investing in the necessary training, particularly given the high staff turnover.

All nine states' respondents also recognized the importance of examining the outcomes associated with implementation of RTI

Evaluating response to intervention

All nine states' respondents recognized the importance of examining the outcomes associated with implementation of RTI. Respondents from six states stressed that accurately understanding and measuring the outcomes and impact of RTI would require robust evaluations that take into account a school's fidelity of implementation. The Arkansas respondent explained some of the needs for a rigorous evaluation:

> We need to control for other variables to really know the impact of RTI; otherwise, you're just making assumptions. Variation among districts in implementing RTI makes it difficult to have a good comparison group. We have to ensure that people are well trained, that they're following the same rubric, and that they're implementing their program with integrity.

Exploratory stage of state RTI evaluations. While all respondents voiced the need for evaluating RTI programs, they also acknowledged that plans to do so were in the exploratory stages, mainly because of limited statewide implementation and the short time that RTI had been in place. As a state respondent in Nevada explained, "I don't think our system is currently mature enough to look at

Respondents from six of the nine states expressed some concerns about the state level leadership and capacity to implement and support RTI

what changes have been made in student achievement, except at a very few schools."

Arkansas, California, and New Mexico respondents acknowledged the need for a better statewide database for effectively tracking the implementation and outcomes of RTI. Arizona plans to launch a statewide database in 2009 that would include longitudinal achievement data, demographic information, and individual identifiers to track mobile students.

Use of pilot programs for evaluation. Nevada, Pennsylvania, and Washington respondents noted that pilot programs provided an opportunity to collect detailed implementation and outcome data. Nevada provided participating schools with a tool for assessing their implementation efforts and the resulting outcomes.

Pennsylvania's pilot program in seven elementary schools, begun in 2006/07, includes an evaluation component (conducted by university consultants) that collects data on the RTI process and student achievement throughout the year (Shapiro and Kovaleski 2007). This ongoing evaluation is designed to assess students' movement through the three tiers, changes in student achievement and special education eligibility, and the outcomes of specific interventions. According to the state respondent, the findings of this evaluation are expected to inform the state's technical assistance for other schools interested in RTI.

State documents report that Washington collects implementation data from its 55 pilot schools through its educational service districts. Starting in 2006/07, this ongoing data collection was to "establish a means for evaluating the effectiveness of professional development and technical assistance to determine whether capacity is being built for school-wide implementation of RTI practices" (Washington State Office of Superintendent of Public Instruction 2007a). The data collection includes visits by educational service district representatives to pilot sites; school profiles, which report monthly special education referrals and counts of students who qualified for special education, discipline referrals, suspensions, and expulsions; information on assessments and curriculum used; and the number and percentage of students at each tier who are screened.

Possible outcome variables for state RTI evaluations. Respondents indicated that evaluation efforts should contain outcome data on student achievement and referrals to special education. Respondents for all nine states mentioned student achievement outcome data as a potential focus for evaluating their RTI processes. Seven state respondents cited a reduction in special education referrals as an anticipated impact of RTI. However, respondents from four of these states noted that reducing the number of referrals was not a state goal of RTI; rather, the goal was to clarify the accuracy and efficiency of the referrals.

Two state respondents noted that they are planning to evaluate RTI. The New Mexico respondent explained that state legislators have requested that the Public Education Department study how districts are using RTI and patterns in outcomes, particularly their use for identifying specific learning disabilities in K–3. The department is currently working on this request. Additionally, the Illinois RTI plan outlines a state evaluation component that will address implementation and outcomes (Illinois State Board of Education 2008). According to state documents, the Illinois evaluation is expected to collect a range of data on skill development of educators, satisfaction of educators and parents based on survey results, and the relationship between implementation integrity and student outcomes. Student outcomes will include achievement; behavior; rates of referral; disproportionality; dropout, graduation, and attendance rates; special education placement; and retention (Illinois State Board of Education 2008).

Ensuring personnel capacity

Respondents from six of the nine states (Arizona, Arkansas, Nevada, New Mexico, Utah, and

Washington) expressed some concerns about the state-level leadership and capacity to implement and support RTI. The New Mexico respondent noted that limiting state leadership to a single person meant that activity slowed when the administrator left the department. As a result, the state will be convening an advisory team to sustain the momentum by collaborating, problem solving, and providing feedback and recommendations to the state department on RTI rules, policies, procedures, and practice. The Washington respondent remarked, "There are pockets of work across all departments, but no strategic plan for statewide implementation."

Respondents from Arkansas and Nevada noted limited staff capacity at the state level to support districts and other constituents. The Arkansas administrator cited this as an argument for collaboration: "We lack the manpower to devote to RTI, and that's a reason why it can't just be special education working on this. We can't have the impact that we want to have if it was just left to special education to do." A Nevada respondent noted the problem even though Nevada has dedicated one full-time employee (of the seven special education personnel at the state level) to work on RTI.

Utah's respondent described concerns with multiple obligations and initiatives that can detract from a focus on RTI:

> Even though RTI is integrated into all of our special education initiatives for improvement . . . and we're trying to integrate it in all educational initiatives . . . the challenge is the numbers of hours in the day and our sense of urgency in making sure this is implemented. . . . You juggle a lot of balls.

Working with limited scientifically based evidence on response to intervention

Four respondents pointed to the limited research on RTI and the dearth of experience with implementation at the state level in certain conditions. A California administrator noted the need for more research about evidence-based interventions, particularly in math. The Illinois respondent noted that the state is developing training modules for implementing RTI at the middle and high school levels, as well as for research-based interventions. Nevada is developing models for implementing RTI at the secondary level—a less developed application than at the elementary level. And the Pennsylvania respondent explained:

> RTI is not 25 years old. We don't have a great body of evidence. We do have a great body of evidence on some key elements of RTI, but not on the impact of the structure itself on student learning, which has to be our bottom line. We're still learning what works and what doesn't work.

Coordinating fiscal resources

Respondents from California, Illinois, Nevada, and Utah raised considerations about how to allocate and use the fiscal resources needed to carry out both state- and local-level RTI efforts. Two state respondents mentioned a general need for more resources for RTI, including for data warehousing systems to alleviate the fiscal pressures districts face.

A specific concern raised by one state respondent was the difficulty of finding ways to comply with state and federal regulations in the use of both special education and general education funds. The Utah respondent explained that the state had exhausted the federal special education funding that it could provide to districts and would benefit from more funding from non-special-education sources. The respondent noted that such funding would bolster the state's view that RTI is not simply a special education initiative.

Respondents from four states raised considerations about how to allocate and use the fiscal resources needed to carry out both state- and local level RTI efforts

The other three state respondents that mentioned funding noted that it was not the overall

level of funding that was an issue, but rather the difficulty of coordinating a policy across different funding sources to lessen the burden on schools and districts. For instance, even though California is facing a fiscal crisis, a state respondent did not cite funding as a major obstacle but noted that fiscal limitations influenced how the state was structuring its technical assistance: "That's why it's so important that we look at integrating RTI with existing systems and trainings, so people don't feel like they have to start something new without additional funding." A Nevada respondent similarly noted that some of the state effort was focused on helping districts think about reallocating existing resources to support RTI.

Incorporating student diversity

In implementing RTI policy, as with any other education reform or policy states need to consider the diverse needs of students. Respondents from Arizona, California, Illinois, and New Mexico specifically mentioned diversity in student population and geography as an important consideration for supporting the needs of districts in implementing RTI.

The Arizona respondent noted that districts can have from 5 to 5,000 teachers, with considerable variation in student needs and mobility, which can affect scaling up RTI. To address student mobility, the state is developing a statewide database with unique student identifiers that will allow progress-monitoring information to follow the student.

The Illinois and New Mexico respondents also raised the issue of diverse student needs in their states, particularly the needs of English language learner students. Both respondents noted that state-level committees included (or will include, in New Mexico's case) representatives of English language learner programs. The Illinois respondent remarked that meeting diverse student needs entailed more than obtaining representation: "I think there's a lot of work and relationship building with different constituencies (such as those representing English language learner students) that has to go on. I think it's finding the right person that represents the constituency's best interest." Thus, these state respondents raised issues affecting education in general that they believed they would need to tackle through the RTI initiative.

Most respondents indicated that full RTI implementation was occurring in only a few schools and districts in their state

CONCLUSION

Across the nine states featured in this study, RTI was described both as an alternative to the IQ-discrepancy model for identifying students for special education and as an overarching conceptual framework for improving the performance of all students. All respondents discussed the duality of this vision, and most seemed to see these two aspects of RTI as complementary. In a study of six southeastern states, Sawyer, Holland, and Detgen (2008) found similar results from interviews with state respondents. The primary motivations that state education agency officials gave for state-level adoption of RTI were to address disproportionality issues, promote overall student achievement, integrate efforts across special and general education, and identify students with specific learning disabilities (Sawyer, Holland, and Detgen 2008).

Despite this generally broad vision, most respondents in this study indicated that full RTI implementation was occurring in only a few schools and districts in their state. As an example, while Arizona's rollout of RTI appeared to be highly structured, the state respondent explained that only one district had received approval to use RTI as an alternative to the IQ-discrepancy model for identifying students with specific learning disabilities. In addition, while Illinois and New Mexico had mandates in place for statewide implementation in the next year or so, respondents noted that much work remained to achieve this.

Considerations for state-level approaches to RTI reported by state respondents focused on establishing general education staff buy-in and ownership (all nine states), evaluating implementation and outcomes (all nine states), and ensuring

fidelity of implementation (six of the nine states). Other issues, each cited by four of the nine states, included the limited research and experience in implementing RTI in specific circumstances, coordination of fiscal resources, the rollout of a state-level framework, and student diversity. Accordingly, respondents noted that they could benefit from technical assistance and additional research in the following areas:

- Respondents from four states reported a need for more information for implementing RTI in secondary schools and in schools with large English language learner student enrollments and for more specific information on research-based interventions to use as students progress through the tiers.
- Respondents from six states called for more research and information on the use of RTI as a conceptual framework to guide statewide education improvement efforts. While all respondents described using RTI as a broader framework, the challenge for states was distinguishing their broader initiatives from special education to achieve greater general education buy-in.
- Respondents from all nine states cited the importance of evaluating the impact of RTI, but all states were still working on identifying the most appropriate research questions to assess efficacy, the data that would be needed, and how to collect and analyze them.

APPENDIX A
PROFILES OF STATE APPROACHES TO RESPONSE TO INTERVENTION

This appendix summarizes response to intervention (RTI) policies and programs in the nine study states.

Arizona

RTI is not a state mandate in Arizona, and individual districts and charters decide whether to implement it. The Arizona Department of Education defines RTI as a process that focuses on early evaluation and intervention, not classification of disabilities. However, districts may use RTI to identify students with learning disabilities, along with the IQ-discrepancy model (Ratcliffe and Rispoli n.d.). If a district chooses to use only the RTI model in evaluating students for learning disabilities, the district must submit a letter of assurance to Arizona Department of Education to ensure the integrity of the RTI process (Arizona Department of Education, n.d.-b).

State oversight. RTI is overseen by a team from the School Effectiveness Division that includes personnel from the Standards and Assessment, Early Childhood, K–12 Literacy, Exceptional Student Services, English Language Learners, Gifted Education, and School Safety Divisions. The Exceptional Student Services division—the state's special education division—oversees the letters of assurance that districts and charter schools must submit if they use the RTI process to evaluate and identify students with specific learning disabilities.

RTI framework components. Arizona's RTI program is designed for grades preK–8 and includes the following components:

- Screening and benchmarking of reading, math, and writing skills, with curriculum-based measures used three times a year.
- Three-tiered model of interventions.
- Targeted interventions when screening data indicate that the whole class is below average.
- Scientifically based research in the interventions and instruction for all tiers.
- Process to assess the integrity of the implementation of instruction and progress monitoring at each tier.
- Team problem-solving approach, including a review of existing data.
- Encouragement of parent involvement at each tier (Arizona Department of Education n.d.-a).

State support

Training. The Exceptional Student Services Division provided K–8 RTI training during 2005–09 to more than 125 schools. According to the state respondent, schools received capacity-building grants to attend. Participant teams from each school or district committed to three years of training with the goal of creating a plan for using the RTI process to identify students with specific learning disabilities.

Other support. Along with training, the state provides assessments and interventions in math, reading, and writing and a database for screening and benchmarking whole classes with curriculum-based measurement probes (school teams may still choose to use a private vendor database).

Arkansas

According to the state respondent, Arkansas's RTI effort, known as Closing the Achievement Gap (C-TAG), was developed and is coordinated by the Arkansas Department of Education to comply with the adequate yearly progress provisions of the No Child Left Behind Act of 2001 and the 2004 reauthorization of the federal Individuals with Disabilities Education Improvement Act of 2004 (IDEA). An integrated approach to school improvement and success, C-TAG seeks to maximize

student achievement through positive behavior support systems, academic supports and services, professional development and mentoring, functional assessment, data-based problem solving, formative and summative evaluation, and parent and community outreach. At the school site, early intervention services and RTI processes are coordinated by the school prevention, review, and intervention team (SPRINT)—a team of educators, related service professionals, administrators, and others who use a service-delivery model emphasizing data-based problem solving, classroom-centered consultation, and evidence-based intervention (Knoff 2007a). The scientific foundation of the C-TAG initiative is Project ACHIEVE, an evidence-based school reform and continuous improvement program implemented in Arkansas's schools since 2003 (Knoff 2008).

While RTI is not mandatory, state regulations that took effect in July 2008 include it as part of the process that a district may use when evaluating whether a student is eligible for special education services as a student with a specific learning disability (Arkansas Department of Education 2008). According to the state respondent, the Arkansas state rules and regulations, drawing explicitly on the federal IDEA regulations, require districts to provide research-based interventions, implemented with integrity, to students not responding to effective instruction in their general education settings and to use data to determine their responsiveness to these interventions.

State oversight. C-TAG is a collaborative response by the general education and special education sections of the Arkansas Department of Education, with the general education section taking the lead.

RTI framework components. Arkansas's RTI model is represented as three concentric circles with "on and off ramps" connecting the circles to represent movement between intervention levels as a function of student need. These circles are embedded in the four primary steps of the problem-solving process: problem identification, problem analysis, intervention implementation, and formative and summative evaluation. The outer ring represents core instruction, the middle ring strategic intervention, and the inner ring intensive or crisis-oriented intervention. Arkansas's RTI program components are designed to address all grade levels with a focus on literacy, math, science, and behavior. Interventions at all three levels can be implemented in a general education setting, including those at the most intensive level. The third level of intensive intervention does not necessarily involve special education services delivered through an individualized education program.

The state's RTI model is implemented through a functional assessment, data-based, problem-solving approach (Arkansas Department of Education n.d.), which requires practitioners to complete the following interrelated steps when a student is not responding to effective classroom instruction or behavior management:

- Review all student data.
- Collect any needed additional data.
- Conduct a reliable and valid analysis of the student's current functioning in the area of concern, and identify any gaps with the desired level of functioning.
- Develop hypotheses to explain any identified gaps.
- Conduct reliable and valid data-based assessments to confirm or reject the hypotheses.
- Link validated hypotheses with scientifically based interventions, and develop the intervention plan.
- Prepare to implement the intervention plan by coordinating needed resources, conducting intervention training, and organizing evaluation activities.
- Implement the interventions.

- Evaluate student, staff, and other outcomes (Knoff 2007b).

State support

Funding. In 2003 the Arkansas Department of Education Special Education Unit received a five-year, $1.6 million a year state improvement grant from the U.S. Department of Education Office of Special Education Programs. One of the grant's aims is to enable states to provide positive behavior support strategies and interventions at the elementary school level and research-based literacy instruction strategies for underachieving students at the K–12 level. Since the implementation of the grant, at least 40 elementary schools have received training, technical assistance, and on-site consultative services to establish positive behavioral support systems, and 24 elementary or secondary schools have received similar services to establish effective schoolwide literacy programs and implement research-based literacy interventions when needed (Knoff n.d.).

In addition, all districts have the authority to use up to 15 percent of their federal Part B funds to support preventive RTI programs and activities for students who have not been identified for services under IDEA.

Training. The state provides RTI training and technical assistance to districts and schools. Since 2003 at least 25 schools have been trained in effective literacy practices and interventions, at least 50 schools have been trained in implementing positive behavioral support systems, and at least 75 schools have been trained in the SPRINT process through funding from the Arkansas state improvement grant. The Arkansas Department of Education also is collaborating with the University of Central Arkansas and the University of Kansas Center for Research on Learning to provide high-quality professional development to teachers and principals in the strategic instruction model, which addresses RTI at the secondary school level (Knoff 2007b). This professional development program, completed at the end of the 2008/09 school year, will have trained more than 60 teachers to implement strategic instruction model strategies in their classrooms. In addition, 11 Arkansas educators will be certified as strategic instruction model professional developers, eliminating the need to contract such services from out of state.

The state improvement grant has been used to support the development of myriad professional development products and resources (for example, technical assistance papers, PowerPoint presentations, DVD series, intervention web sites, data tracking and analysis software) for educators across the state (Knoff n.d.). To support the independent and guided professional development and technical assistance needs of educators statewide, these and other resources have been posted on the Arkansas state improvement grant web site (www.arstateimprovementgrant.com), on the Literacy Interventions web site (www.literacymatrix.com), on the Project ACHIEVE web site (www.projectachieve.info), and on a state-developed and -maintained professional development web site, Arkansas IDEAS (www.ideas.aetn.org).

Beyond the efforts funded by the state improvement grant, the Arkansas Department of Education Office of Professional Development has conducted statewide video presentations through the regional Educational Services Cooperatives to introduce schools to Arkansas's Closing the Achievement Gap model and initiate local assessment and planning of implementation.

California

California Department of Education staff reported in July 2008 that RTI at the state level was in the early stages of development and that state administrators are working to develop a working definition of the RTI process. California does not mandate RTI, but schools may use it as an alternative to the IQ-discrepancy model for learning disability determination. Eligibility decisions should be based on the gap between a student and benchmark/peers and their response to intervention "within a reasonable period of time" (Elliot and

Batsche 2006). Expected outcomes for schools and districts that implement RTI include more students achieving adequate yearly progress in reading, less overrepresentation of minority students in special education, earlier student interventions, significantly fewer special education referrals, and earlier, more accurate identification of academic and social problems (Elliot and Batsche 2006).

State oversight. The California Department of Education determined in 2005/06 that RTI was to be a collaborative effort between general and special education (Sacramento County Office of Education 2006a). According to a state respondent, the deputy superintendent of curriculum and instruction and the special education director take the lead in RTI.

RTI framework components. California's three-tiered RTI model addresses both academic and behavioral interventions. At tier I, all students are screened and their progress is monitored. At tier II, interventions are implemented and measured. At tier III, cognitive and emotional factors that contribute to learning failure are identified. Interventions target primarily reading and literacy instruction in the elementary grades (Moore-Brown 2006). The core components of the RTI model aim to:

- Screen early.
- Identify those at risk for reading failure.
- Intervene using research-based programs.
- Monitor students' progress frequently (at least every two weeks).
- Refer students who do not respond for further assessment and possible eligibility for special education (Lloyd-Jones n.d.).

To monitor student progress, the state recommends that several types of data be collected, including districtwide and adequate yearly progress data to determine the performance of students in the same grade or class, attendance and mobility data to evaluate whether a student has had adequate access to the curriculum, coding referrals to determine the needed interventions, and the results of schoolwide screening programs (for example, Dynamic Indicators of Basic Literacy Skills and curriculum-based measurement) to identify high- and moderate-risk students (Elliot and Batsche 2006).

State support

Training. In 2005/06 the California Department of Education contracted with a consultant and the Sacramento County Office of Education to provide an RTI webcast training series. The webcasts included online webinars, discussions, and question and answer sessions providing detailed guidance to administrators and site-based teams on how to implement this new approach (Sacramento County Office of Education 2006b).

The California Department of Education also provides training to schools through the general education program improvement process called the Riverside County Achievement Team (RCAT). Developed in 1999, RCAT began to provide RTI training after 2004. Eight regional teams have received grants to take RCAT training "infused" with RTI. Each team is then responsible for providing this training to staff at three sites. RTI implementation was monitored by looking at student outcomes, outcomes for students with disabilities, graduation rates, dropout rates, and parent participation (California Department of Education 2006).

Illinois

In Illinois RTI is part of a comprehensive effort to increase overall student achievement. Effective June 2007, Illinois state rules require each district to implement by the beginning of the 2010/11 school year a process for determining how a child responds to scientific, research-based interventions as part of evaluating whether a child has a specific learning disability (Illinois State Board of Education n.d.). Districts may use an

IQ-discrepancy model in addition to RTI (Illinois State Board of Education 2008). State rules also required districts to develop plans by January 1, 2009, on what resources they would devote to RTI and to outline the types of state-level assistance needed to support school-level implementation.

State oversight. The Special Education Department of the Illinois State Board of Education provided the initial leadership for the state's RTI efforts in 2006. According to the state respondent, the Special Education and the Curriculum and Instruction Divisions began collaborating on RTI in 2007 and continue to provide joint leadership, with the goal of transitioning RTI entirely to general education in the future.

RTI framework components. RTI focuses on grades K–12 in all subjects, including behavior, and has three essential components:

- *Three-tier model of school supports.* Resources are allocated in direct proportion to student needs, with increasingly more intense instruction and interventions.

- *Problem-solving method of decisionmaking.* Across the tiers the problem-solving method is used to match instructional resources to educational need. The problem-solving method has four components: define the problem (determine the discrepancy between what is expected and what is occurring); use data to determine why the discrepancy is occurring; determine a student performance goal, an intervention plan to address the goal, and a means of monitoring student progress and ensuring implementation integrity; and use progress-monitoring data to evaluate the effectiveness of the intervention plan.

- *Integrated data collection that informs instruction.* Within the RTI model, progressively more intensive interventions and supports are coupled with more frequent progress monitoring of student achievement by teachers and site administrators to guide instructional planning (Illinois State Board of Education 2008).

State support

Training. The Illinois State Board of Education provides technical assistance and professional development in RTI to districts through its network of four regional centers (Alliance for School-based Problem-solving and Intervention Resources in Education, ASPIRE). The objectives are to:[5]

- Deliver standardized, research-based professional development in problem-solving, including RTI; scientifically based reading instruction; and standards-aligned instruction and assessment through a coaching model targeted to demonstration districts in each region, large-scale trainings throughout each region, and ongoing technical assistance to schools.

- Increase parent participation in decisionmaking.

- Incorporate the professional development content into general and special education preservice and graduate curricula.

- Evaluate the effectiveness of project activities.

Additional training in RTI basics is provided through the regional offices of education and the intermediate service centers, which provide awareness building and initial training for districts and schools in writing the required RTI plan and implementing RTI.

Pilot programs. The Illinois State Board of Education supports pilot programs through a federal state personnel development grant at Even Start Performance Information Reporting System (ESPIRS) sites.[6] These sites receive training to support their efforts to integrate RTI into their literacy programs for grades K–3. According to the state respondent, the Illinois State Board of Education is implementing another pilot program

through the state regional offices of education that gives school improvement coaches additional training in scientifically based interventions and data use. These coaches will then provide support to districts to aid RTI implementation.

Other support. The Illinois State Board of Education has assembled a stakeholders group that includes representatives of various divisions, teacher unions, professional organizations, and associations; district staff; principals; and parents. The group advises the Illinois State Board of Education as it prepares statewide RTI implementation plans. According to the state respondent, the group has helped develop training modules based on needs in the field and advocated for increased professional development for secondary teachers around RTI.

Nevada

In Nevada RTI is a comprehensive intervention approach that addresses the academic and behavioral needs of students in grades K–12. RTI is not mandatory, but it is seen as a promising practice. Individual districts decide how and when to use the intervention system to identify students with learning disabilities. Although the Nevada State Department of Education gives school districts considerable autonomy in developing and implementing intervention programs, the district must develop a written intervention plan for individual students if RTI is used for evaluating and identifying students with specific learning disabilities. The plan must:

- Identify academic and behavior concerns.
- Detail the discrepancy between the student's performance and the demands of the setting.
- Describe the interventions provided.
- Identify the progress data that will be collected to measure the level and rate of learning.
- Describe the frequency of data collection, how data will be summarized, criteria for evaluating effectiveness, and schedule for evaluating the effectiveness.
- Be given to the parents.
- Require parents to be notified about the right to request an evaluation.
- Describe the requirements for providing notice of proposals and refusals in response to a parent request for evaluation.

State oversight. According to a state administrator, state RTI efforts are led by the Office of Special Education, Elementary and Secondary Education, and School Improvement Programs within the Nevada Department of Education, with special education providing primary leadership.

RTI framework components. Nevada's RTI framework is based on quality leadership and quality classroom instruction and includes the components that state stakeholders identified in 2004 as essential to an effective RTI system:

- Universal screening to determine whether students are performing at grade level.
- Structured problem solving to define and analyze any discrepancy between a student's achievement and the benchmark.
- Evidence-based interventions incorporated into an intervention plan for every student receiving reinforcement beyond tier I.
- Progress monitoring to ensure that students are moving toward mastery of state standards.
- Fidelity of system implementation, ensured by qualified staff who collect observation data at least three times a year (Nevada Department of Education 2008).

According to a state respondent, to provide targeted interventions to struggling learners, districts may use the instructional consultation

team model or the three-tiered standard protocol model. Developed by the University of Maryland, the model involves the "development, training, implementation, and evaluation of interdisciplinary school-based teams" (University of Maryland n.d.).

State support. The state has offered a range of technical assistance to school districts to develop, implement, and sustain RTI systems. In 2006 the Nevada Department of Education collaborated with the Instructional Consultation Lab at the University of Maryland to implement the instructional consultation team model as a basis for an intervention system that supports data-based decisionmaking, collaborative problem solving, monitoring for progress, and scientific research-based interventions. Pilot programs were initiated in 12 school districts (Nevada Department of Education 2006).

The state also provides technical assistance training on policy development for the identification process and discretionary grants to districts to support their fiscal needs. The Nevada Department of Education has collaborated with Title I, Title III, and state school improvement initiatives to increase the extent to which RTI is embedded in district and school improvement efforts as part of whole school reform efforts to raise the achievement of all students. According to a state respondent, this collaboration includes making Title I funds available through grants to support initiatives such as schoolwide intervention systems and embedding data analysis questions on intervention systems in the state's school improvement process.

According to a state respondent, the state director of the Office of Special Education and the 17 special education directors meet for three days every other month during the summer to discuss RTI, including scale up and sustainability, and to analyze data from around the state.

The Nevada Department of Education developed a spreadsheet tool to help schools and districts measure their implementation of each of the essential components of RTI and target priority areas for improvement efforts (Nevada Department of Education 2008).

New Mexico

In New Mexico RTI is a companion to a larger school improvement framework that focuses on overall student achievement and positive behavior support. RTI is considered an integrated service delivery model for students in general, remedial, and special education that uses a problem-solving approach to guide instruction for all students needing assistance (New Mexico Public Education Department 2006). A state rule adopted in 2004 mandates that schools follow a three-tiered model as a "proactive system for early intervention for students who demonstrate a need for educational support for learning" (New Mexico Public Education Department 2007a). In addition, by July 1, 2009, all schools must use a "dual discrepancy" model (students are identified as having a learning disability if they have a discrepancy from their peers in both initial performance and performance over time) in conjunction with the traditional IQ-discrepancy approach for identifying grade K–3 students with specific learning disabilities (New Mexico Public Education Department 2007a).

State oversight. According to the state respondent, the New Mexico Public Education Department Quality Assurance Bureau provides most of the technical assistance in support of RTI implementation.

RTI framework components. Key components of the RTI framework include:

- A three-tier K–12 model for all content areas and behavior, including universal screening (at least three times a year using data from short-cycle assessments, New Mexico's Standards-Based Assessments, and Curriculum Based Measures) and core instruction with increasingly intensive levels of intervention.

- Evidence-based curricula and methodologies used in general education, special education, and supplemental programs, which may include small-group or more intense instruction for identified students for at least four weeks.

- Ongoing assessment and progress monitoring of students' skills and progress using curriculum-based measures.

- Systematic decision rules for moving between tiers (New Mexico Public Education Department 2006).

In addition, school-based student assistance teams, composed of school administrators, general and special education teachers, resource teachers, and counselors, provide additional support to general education teachers and struggling students in the general education setting (New Mexico Public Education Department 2007b). The student assistance teams must use the RTI process to ensure that schools meet all students' needs (New Mexico Public Education Department 2006). The teams are responsible for developing individualized interventions based on problems found through general screening in tier I or concerns brought up by parents, teachers, or other staff.

State support

Training. To support local RTI implementation and build capacity, the Quality Assistance Bureau conducted a four-day student assistance team "train the trainers" academy in 2007/08 to provide professional development to designated district-level staff on the core elements of the RTI framework and on the role of student assistance teams. According to the state respondent, staff from 35 of 89 districts, as well as several regional education cooperatives, participated. The trainers train and support school-based student assistance teams in their district using material and resources from the state. The Quality Assistance Bureau hoped to provide follow-up training to these trainers in 2008/09. The Quality Assistance Bureau has also given RTI presentations to principals and district administrators to increase local capacity for implementing the state framework.

Other support. The New Mexico Public Education Department has published numerous manuals and factsheets on RTI implementation, including a detailed student assistance team manual on developing interventions, documenting progress, and using tools (New Mexico Public Education Department 2007b). The manual also provides information on New Mexico's RTI framework and resources for educators (New Mexico Public Education Department 2006).

In September 2008 the New Mexico Public Education Department launched a new RTI web page on the state web site's homepage (www.ped.state.nm.us). The web page features links for policy, guidance, professional development opportunities, and resources from across the country.

According to the state respondent, the New Mexico Public Education Department is forming an RTI state advisory team, which will include key department staff and district stakeholders, a parent advocacy group, teacher unions, and universities. The RTI state advisory team will provide information and recommendations to department leadership on the state's approach to RTI.

Pennsylvania

Pennsylvania defines RTI as a standards-aligned, early intervention strategy with a focus on instruction and assessment that falls within the state's broader school reform framework. Its primary goal is "to improve student achievement using research-based interventions matched to the instructional need and level of students" (Pennsylvania Training and Technical Assistance Network n.d.-a). Pennsylvania's special education regulations permit districts to use either RTI or the IQ-discrepancy model to determine eligibility for special education. Pennsylvania Department of Education guidelines for identifying students with specific learning disabilities require school districts that opt to use RTI to "establish an early

intervening program to guarantee the provision of scientifically based interventions delivered with fidelity as well as a system of ongoing assessment that is valid and reliable to be used for eligibility decisionmaking" (Pennsylvania Training and Technical Assistance Network 2008).

State oversight. The Pennsylvania Department of Education Bureau of Teaching and Learning provides oversight for RTI as a general education initiative. RTI was initially rolled out in Pennsylvania under the Bureau of Special Education in 2002/03 but was shifted to the Bureau of Teaching and Learning the following year. Special education continues to partner with general education in support of RTI but does not provide its primary leadership.

RTI framework components. Pennsylvania's RTI is a K–12 early intervention strategy. It is a standards-aligned, multitiered strategy to enable early identification and intervention for students at academic and behavioral risk and may be used as an alternative method to identify students with learning disabilities. Program components include:

- *Standards-aligned instruction.* All students receive high-quality, research-based instruction in the general education standards-aligned system.
- *Universal screening.* All students are screened to determine academic and behavior status against grade-level benchmarks.
- *Shared ownership.* All staff (general education teachers, special education teachers, Title I, and others) are active in student assessment and instruction in the standards-aligned system.
- *Data-based decisionmaking.* A public, objective, and normative framework is used for guiding school decisions on instructional changes, choices of interventions, and appropriate rates of progress that includes progress monitoring and benchmark and outcome assessments.
- *Tiered intervention and service delivery system.* A three-tiered system provides students with increasing levels of targeted scientifically, research-based tailored to individual student need. Tier I provides foundational standards-aligned curriculum and instruction to all students. Tier II provides strategic interventions for students who fail to make expected progress in the standards-aligned system and who are at risk of academic and behavioral failure. In Tier III intensive interventions are provided for students who are significantly below established grade-level benchmarks.
- *Parental engagement.* Parents receive information about their child's needs, interventions, and academic goals (Pennsylvania Training and Technical Assistance Network 2008).

State support

Training. The Pennsylvania Department of Education provides numerous RTI training opportunities for schools and districts through the Pennsylvania Training and Technical Assistance Network (PaTTAN).[7] PaTTAN supports the initiatives of the Bureau of Special Education and builds the capacity of local education agencies to serve students who receive special education services. PaTTAN's web site offers numerous resources including training materials, professional development opportunities, RTI factsheets, school and district RTI readiness checklists, and information on curriculum, assessments, and progress monitoring. PaTTAN's three regional offices serve 29 intermediate units throughout the state to improve student achievement by building the skills of intermediate unit and school personnel. According to the state representative, an RTI consultant in each PaTTAN and intermediate unit site provides further RTI support and professional development to the schools and districts in their region.

Pilot programs. The Pennsylvania Department of Education and the Bureau of Special Education developed a pilot project to increase knowledge of the requirements, processes, and outcomes

for implementing an effective RTI system in a school. Seven elementary schools, each in different districts, were selected as pilot sites and received funding to support RTI implementation in reading, math, and behavior. The goal of the pilot program is to provide answers to targeted research questions (for example, what is the impact of a three-tiered model or of specific interventions and how do students move through tiers?) to help develop a statewide RTI framework, including guidance to schools across the state that anticipate implementation of RTI (Pennsylvania Training and Technical Assistance Network n.d.-b). The Pennsylvania Department of Education is also developing a pilot program for secondary schools.

Other support. According to the state respondent, the Pennsylvania Department of Education has established an RTI statewide work group, which includes constituents from a variety of stakeholder groups (parents, teachers, representatives from the principal association and intermediate units, and so on). The work group advises the Pennsylvania Department of Education on its RTI efforts and provides a statewide perspective on RTI implementation. It has also provided guidance to schools and districts on using RTI for determining specific learning disabilities, developed resources and tools for parents to increase communication around RTI, and drafted a framework for RTI implementation in secondary schools.

Utah

According to the state respondent, the Utah State Office of Education is developing an overarching RTI program.[8] In the meantime the state has supported the Utah Personnel Development Center (a statewide professional development center funded by IDEA money), developed a three-tier model of reading instruction for K–12 teachers, and created the Academics, Behavior, and Coaching training program (Utah Personnel Development Center 2007). In addition, according to the state respondent, in August 2008 the Special Education Services Unit disseminated guidelines—developed by a stakeholder group and steering committee—for identifying students with specific learning disabilities that includes the use of RTI, the IQ-discrepancy model, or a combination of both.

State oversight. The Special Education Services Unit oversees the development of RTI. However, the initiative has been jointly supported by general and special education divisions. A state-level team, consisting of the special education director, Title I director, curriculum director, director of career education, and director of educator quality, was convened to direct instructional planning, including RTI. According to the Utah respondent, the state emphasizes collaboration among general and special education educators, administrators, and specialists at the local level.

Related RTI programs. In 2007 the three-tier model of reading instruction for K–12 teachers was formally adopted by the State Board of Education as a framework for literacy and reading instruction. The program aims to reduce the prevalence of struggling readers by creating a K–12 standards-aligned instructional system with the following components (Utah State Office of Education 2007b):

- Core instruction for all students and administration of assessments, including screening, diagnostic, progress monitoring, and outcomes.
- Supplemental targeted instruction to meet the specific needs of students.
- Evaluation using progress-monitoring assessment data to determine the success of interventions.
- Intensive targeted interventions for at-risk students.

According to the state respondent, this model is being expanded to provide a framework for classroom instruction and intervention for all content areas (numeracy, literacy, and math).

The Academics, Behavior, and Coaching initiative is a statewide training program to support schools'

implementation of RTI to improve academic performance and social behavior. The initiative seeks to develop a positive school climate in which staff maintain high expectations for all students and implement "scientifically validated practices that support student academic and social outcomes" (Utah State Office of Education 2005). Modeled as a triangle divided into three horizontal tiers of increasingly intense interventions, the initiative is a set of professional development activities, strategies, and interventions that aim to use research-based strategies and data to guide instructional decisions and valid and reliable assessments to screen, diagnose, and monitor students. These practices are built on the belief that all students are part of one system in which they can all learn (Utah State Office of Education 2005).

State support

Funding and training. According to the state respondent, for the past five years the Utah State Office of Education has used discretionary IDEA funds to build capacity for RTI at the local and state levels through professional development. The statewide professional development center provides educators and administrators with technical assistance, training, and conferences. Districts and schools can apply to receive funds from the state's federal school improvement grant to support the development of RTI at their sites.

Pilot programs. According to the state respondent, several model sites are now in place for Utah's Academics, Behavior, and Coaching initiative. Seventy-three schools have been trained in this method, and this year 13 additional schools will pilot the initiative.

Other support. According to the state respondent, the Special Education Services Unit meets monthly with district directors to discuss intervention services. A majority of the directors from all 40 districts attend these meetings. Each month the Special Education Services Unit also holds roundtable discussions with all of Utah's charter schools to collaborate, train, and disseminate information.

Washington

Washington legislation does not mandate the use of RTI for identifying students with specific learning disabilities. Instead, school districts have the authority to "develop procedures for the identification of students with specific learning disabilities, which may include the use of: 1) a severe discrepancy between intellectual ability and achievement; or 2) a process based on the student's response to scientific, research-based intervention; or 3) a combination of both" (Washington State Office of Superintendent of Public Instruction 2007b).

State oversight. According to the state respondent, in previous years the Special Education Division of the Office of Superintendent of Public Instruction led Washington's RTI efforts and was responsible for its rollout. In 2006 the Office of Superintendent of Public Instruction began engaging general education in joint trainings around RTI implementation and considering how to transition the leadership of RTI to general education (the Teaching and Learning Division). Special education continues to work collaboratively with general education in support of RTI.

RTI framework components. According to the state respondent, Washington's three-tiered RTI model, which addresses all core subject areas and behavior, is designed for grades K–12, with a special emphasis on early childhood education. All three tiers include high-quality, research-based, differentiated, and culturally responsive instruction for all students. Universal screening in all content areas occurs three times a year in tier I, and students identified as at risk are referred for progress monitoring and for strategic interventions in tier II, if necessary. Diagnostic assessments may be administered at this time, as determined by local decisionmaking teams. Tier III includes intensive small-group interventions four or five times a week, typically with more frequent progress monitoring.

Districts that opt to use an RTI process for determinations of specific learning disability must

ensure that the process includes the following elements (Washington State Office of Superintendent of Public Instruction 2007b):

- Universal screening or benchmarking.
- A high-quality core curriculum designed to meet the instructional needs of all students.
- Scientific, research-based interventions for students needing additional instruction.
- Scientific, research-based interventions that are appropriate for each student's identified need and that are implemented with fidelity.
- A multitiered model for delivering both the core curriculum and strategic and intensive scientific, research-based interventions in the general education setting.
- Frequent monitoring of individual student progress.
- Decisionmaking using problem-solving or standard treatment protocol techniques, based on student-centered data.

For students who receive two intervals of tier III interventions, the decisionmaking team determines whether the student has made sufficient progress (or is on a trajectory to meet state-approved standards) or has not responded to tiered interventions and thus needs more intensive instructional services through special education. In determining whether a student has a specific learning disability, the decisionmaking team must consider data-based documentation to evaluate whether the student received appropriate and adequate instruction prior to the referral (Washington State Office of Superintendent of Public Instruction 2006).

State support

Funding. According to the state respondent, Washington received a five-year, $1.2 million annual federal state personnel development grant from the Office of Special Education Programs to support professional development for districts to implement RTI. These funds are also used to support preparation of professional development modules for future trainings. The Special Education Division has also set aside $2 million of its federal discretionary funds for RTI for the past two consecutive years.

Training. The state provides professional development mainly through its nine educational service districts. This training typically targets the required team membership at the building level and focuses on system development and implementation. Schools also receive on-site coaching and consultation throughout the school year. In prior years the Office of Superintendent of Public Instruction supported the development of a literacy leadership cadre, which delivered scientific, research-based training to school districts. The educational service districts have now created regional literacy leadership cadres to support local school districts in this effort. The educational service districts' Office of Superintendent of Public Instruction divisions also collaborate to provide RTI training to administrators, coaches, and facilitators in Title I schools as well as schools and districts in improvement.

Pilot programs. According to the state respondent, in the 2006/07 and 2007/08 school years the educational service districts worked with 55 schools piloting RTI programs, and the state has been collecting data from these sites. Schools in the pilot program received training and additional support in implementing RTI. In addition, the state legislature has supported a pilot program of a tiered model since 2002, which was expanded in 2007/08 to include all academic areas and behavior and is based on core RTI principles.

Other support. According to the state respondent, in June 2006 the Special Education Division prepared a manual describing the principles and components of the RTI process. The manual also includes guidelines on decisionmaking in an RTI

system and on how to use RTI data to identify students with specific learning disabilities. The manual also identifies additional resources that school districts can use in developing RTI systems (Washington State Office of Superintendent of Public Instruction 2006b). The RTI manual aligns with Washington's K–12 Reading Model, which includes a three-tiered approach to reading instruction and intervention (Geiger et al. 2005). According to the state respondent, the state is currently building the infrastructure necessary to support similar work in math.

APPENDIX B
DATA COLLECTION AND STUDY METHODS

The study was based on a review of state documents on response to intervention (RTI) policies and programs and on interviews with a key administrator from the state office overseeing RTI. In addition, a review of the literature on RTI was conducted to provide background information.

This study sought information on state-level RTI policies, procedures, and practices in the four Regional Educational Laboratory West states. In addition, five states outside the region were included to provide a greater breadth of description of what is occurring across the nation.

Literature review

To learn more about what is already known about state-level RTI practices and procedures, a comprehensive review of journal articles, education databases, and other web-based repositories was conducted to find studies, reports, and articles on the topic. Content experts were also asked for literature recommendations. This relatively small literature base on state-level RTI policies and procedures was reviewed for findings relevant to this study's research questions.

These reviews of the RTI literature were not intended to examine its effectiveness, but to provide background information.

Sampling

To lay the groundwork for the study and to select five states outside the West Region, all 50 state education agency web sites were reviewed to determine the public availability of documents on RTI policies, regulations, and guidance. This initial review was important to ensure that sufficient information was available at the state level to conduct this study.

This search was conducted using the state education agency web site search functions and search engines such as Google. Westat and Abt's (2007) list of states with RTI initiatives was also consulted, as was the Individuals with Disabilities Education Act (IDEA) Partnership web site list of states that were implementing RTI, early intervening services, and related problem-solving initiatives.[9] This initial screening indicated that 23 states had sufficient information (a minimum of one guidance document and one form or tool) for the proposed data collection effort.

Pennsylvania was the state first selected from this pool of 23 states, to obtain the perspective of at least one long-term implementer of an RTI-related process.[10] Next, data from the U.S. Census (www.census.gov/popest/states/NST-ann-est.html) were used to select states close in population size to each of the four West Region states in an effort to select states to which the region could relate. This was both a straightforward selection criterion and a good proxy for the many factors that might cause one state to identify with another. In addition, differences in scale could have influenced how states implemented RTI. When two states in the list were similar in size, the percentage of student enrollment identified as English language learner students in 2004/05 was used as a secondary criterion (www.ncela.gwu.edu/stats/3_bystate.htm). Many West Region states have large populations of English language learner students. Table B1 shows the population estimates and percentage of English language learner students in the 23 potential sample states in relation to the West Region states.

Based on these three criteria (sufficient documentation, size, and English language learner student population), the pool of selected states after Pennsylvania included New Mexico, Arkansas, Florida, and Washington. Florida declined to participate because of its involvement in a recent RTI study conducted by Regional Educational Laboratory Southeast. Illinois, the next largest state in size, was selected as an alternative.

State document search

An extensive search was conducted of documents pertaining to RTI efforts in the West Region states

TABLE B1

State population and percentage of English language learner students in West Region states and potential sample states

State	State population 2007	Percentage of English language learner students 2004/05[a]
Vermont	621,254	1
North Dakota	639,715	5
South Dakota	796,214	5
Delaware	864,764	4
Montana	957,861	5
Rhode Island	1,057,832	7
Idaho	1,499,402	11
Nebraska	1,774,571	6
West Virginia	1,812,035	less than 1
New Mexico	1,969,915	22
Nevada	2,565,382	18
Utah	2,645,330	12
Arkansas	2,834,797	4
Mississippi	2,918,785	less than 1
Oregon	3,747,455	11
Colorado	4,861,515	12
Minnesota	5,197,621	7
Wisconsin	5,601,640	4
Missouri	5,878,415	2
Arizona	6,338,755	15
Washington	6,468,424	7
Virginia	7,712,091	6
North Carolina	9,061,032	6
Michigan	10,071,822	4
Pennsylvania	12,432,792	2
Illinois[b]	12,852,548	9
Florida[b]	18,251,243	11
California	36,553,215	26

Note: West Region states are in bold; potential sample states are in italics. The potential non–West Region states listed exclude states with insufficient documentation available on the state education agency's web site.

a. Latest data available at the time of the sampling.

b. Florida declined to participate, given its involvement in another Regional Educational Laboratory study, so Illinois was selected as a substitute.

Source: For population, U.S. Census data (www.census.gov/popest/states/NST-ann-est.html); for English language learner students, National Clearinghouse for English Language Acquisition and Language Instruction Educational Programs (www.ncela.gwu.edu/stats/3_bystate.htm).

and the five selected states of Arkansas, Illinois, New Mexico, Pennsylvania, and Washington. The search covered any relevant information issued by states on RTI policies and guidance, including state legislation on RTI, documents describing state-adopted policy on RTI, nonregulatory guidance on RTI, RTI implementation guidelines provided to districts, descriptions of any RTI task force activities, any state-sponsored evaluations of RTI, and technical assistance materials such as assessment tools.

These documents were used to prepare synopses detailing RTI efforts in each state to inform the interviews with state-level staff.

Phone interviews

In-depth, semistructured interviews of about one hour were conducted with a staff member from each state. State education agency web sites and contacts listed in the collected documents were used to identify the individual directly overseeing or responsible for implementing RTI efforts in each state.

The identified individuals were asked by email or phone whether they were the appropriate respondent for these interviews. In two cases (California and Nevada) some of the interview questions were subsequently answered by other identified respondents. The interviews explored the research questions within the context of each state and gathered information on program- and state-specific aspects of RTI to supplement the information collected from documents. Respondents were also asked whether they had any additional materials they could share to clarify their state's approach to RTI policies. (See appendix C for the interview protocol.)

All respondents were advised that state names would be used in the final public report and were provided with report drafts to review for factual accuracy. Eight of the nine state respondents (89 percent) participated in a reliability check of the data by reviewing the report or their state profile.

Data analysis

Information from the document search was categorized across multiple themes, derived from the literature search on RTI in general (National Joint Committee on Learning Disabilities 2005) and in states specifically (Stakeholders Task Force on EIS-RTI-SLD 2006; California Department of Education 2006). At the time of this study, these were among the few documents available that focused on states' approaches to RTI policies with the level of detail needed to create an analytic framework. The following thematic categories were selected (see appendix D for the documentation summary sheet):

- What are the structures of the RTI program? Specifically, what is the nature of the tiers and recommended interventions, areas of focus (for example, literacy, behavior), and procedures for initiating the process?
- What research-based evidence is offered for the different components and interventions of the state's RTI model? If guidance is provided, what evidence is offered on recommended types of interventions at each tier?
- What data are collected, recommended, or made available for monitoring student progress and decisionmaking at the local level and evaluating the effectiveness of the RTI model in place?
- What RTI training and consultation opportunities are offered? What are the topics? Who is the target audience? What is the method of delivery (such as web-based or on-site)?
- What tools and forms are made available for implementing RTI (for example, self-assessment tools for determining school readiness for implementing RTI and templates for designing the instructional plan)?
- What guidance is provided on other operational issues, such as how to measure responsiveness and how to use RTI to identify students with specific learning disabilities?

The phone interviews then allowed for a richer exploration of considerations for state-level approaches to RTI. To ensure valid and reliable data from the coding of state documents, the lead researcher trained two research assistants to code the state's documents using the document coding sheet in appendix D. The lead researcher then reviewed the summaries for accuracy and raised any questions before synthesizing the information into the larger spreadsheet matrix. The lead researcher then coded all the interview data to ensure accuracy and consistency across interviews.

The qualitative interview data were then synthesized in a spreadsheet matrix by content categories, which included organizational structure, nature of state support, capacity building, alignment with other state initiatives, evaluation, and considerations for implementation.

Information across both the document review and interview data matrix was then synthesized to illuminate consistencies and inconsistencies in the way states have designed their RTI policies and guidance. All quotations selected for this report were intended to be representative of the themes being discussed. Quotations that were not representative of all respondents within a theme are noted as such throughout the report.

Based on this synthesis, profiles were developed describing each state's RTI framework components and supports (see appendix A). To ensure the reliability of the interpretation of the document and interview information, these profiles and the draft report were shared with the state respondents for their feedback (eight of the nine states provided input on the profile or report).

Study limitations

The study methods have both strengths and weaknesses. First, only one respondent was interviewed per state (with the exception of California and

Nevada), and their perspective could vary from that of other state administrators or be biased. The small number of respondents also limited external validity. Second, the work provides a state-level perspective on RTI and does not examine variations in implementation of these policies and programs at the district and school levels. Third, because of the nature of the research questions, the study included only states that had committed to developing and implementing a state-level approach to RTI. Thus the interviews and document review cannot capture the perspective of states that have not given priority to RTI and therefore cannot present the perspective of states that might not want to pursue such a policy.

Despite these limitations, the study provides useful information as one of only two studies describing state-level approaches to RTI in these nine states. It can therefore be of importance to state education agency staff responsible for designing or refining their state's RTI policies.

APPENDIX C
INTERVIEW PROTOCOL

Ask about respondent's title/role and how it pertains to the state's response to intervention (RTI) effort.

1. Please provide a brief description of how RTI is defined and implemented in your state.
    - Probe on specific components, focus, and goals.
    - Probe on targeted grades and subjects.
2. How would you define the state's role in this process?
    - Probe on the extent to which mandatory elements are associated with state RTI policies.
    - Where the state is in the development of the RTI process (for example, full implementation, partial).
3. What state policies, practices, and supports are in place regarding RTI?
    - Probe (if not answered) on what specific supports the state provides to schools/districts to develop/implement RTI (probe for supports at the high school level).
    - Who/what has oversight of these state initiatives?
    - How long have these policies and supports been in place/timeline?
    - What groups guided the process?
    - How is the information disseminated?
    - What other strategies exist for building a statewide vision?
    - Whether the state blends funds; and what funding mechanisms, if any, exist for supporting local and state efforts.
4. How is the state building its own capacity and local capacity for implementing RTI?
5. What other state initiatives or context influence the implementation of RTI?
    - Probe on existing programs/structures (such as Reading First) and how they align with RTI.
6. In implementing RTI statewide, what has your state done particularly well?
7. What challenges does your state face in implementing and supporting RTI on a statewide scale? How has the state attempted to address those challenges?
    - Probe on how the state is "scaling up" RTI from a special education intervention at the elementary school level to being used more widely in general education in the K–12 setting. Probe on high school level challenges.
    - What would the state have done differently in hindsight or in the future?
8. What data are or will be collected to measure the implementation and effectiveness of RTI?

Prior to ending the interview, review documents collected and solicit recommendations for other sources.

APPENDIX D
DOCUMENTATION REVIEW SUMMARY SHEET

State abbreviation	
Brief name of document (and date of publication if available)	
Obtained from (such as state education agency web site, university web site, hard copy from state education agency staff)	
Web site address (if applicable)	
Authors (if applicable)	
Date obtained	

Identify document type (check)

❑ Nonregulatory guidance	❑ Task force meeting minutes
❑ Legislation	❑ Tool or form
❑ Evaluation	❑ Graphic
❑ PowerPoint presentation	❑ FAQ/Q&A
❑ Other (please describe):	

Brief summary of intended audience (if stated) and contents

Does it provide information on the response to intervention (RTI) model components (number of tiers, area of focus, recommended interventions, how to initiate the process)? If so, summarize briefly: _____

_____

_____

_____

Does it provide research-based evidence on interventions to be used at each tier, or does it provide guidance on what constitutes research-based interventions? If so, summarize briefly: _____

_____

_____

_____

_____

Does it recommend or mandate (specify which) the types of data to be collected for monitoring student progress and decisionmaking at the local level? If so, summarize briefly: _____

_____

_____

_____

_____

Does it recommend or mandate (specify which) the types of data to be collected for evaluating the effectiveness of the RTI model? If so, summarize briefly: _____

_____

_____

_____

If it is a tool or form, please describe its purpose (for example, school readiness assessment, template for designing intervention plan, and application to implement RTI). Is its use mandatory? ____

_____

_____

_____

_____

Does it provide guidance on how RTI is used to determine eligibility for specific learning disability? If so, summarize briefly: _____

_____

_____

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_____

Does the document describe whether RTI is a special education or general education initiative? If so, summarize (include any state offices listed) briefly:

_____

_____

_____

_____

Does the document describe whether RTI is mandated or an optional process? _____

_____

_____

_____

_____

Does the document describe whether the standard treatment protocol or the problem-solving model is used? If so, summarize briefly:_____

_____

_____

_____

_____

Does the document indicate when the state initiated the RTI process? _____

_____

_____

_____

Does the document describe specific supports the state provides to districts to assist them in the development/implementation of RTI? If so, summarize briefly: _____

_____

_____

_____

Does the document describe specific supports the state provides to schools to assist them in the development/implementation of RTI? If so, summarize briefly (document whether specific references are made about supporting RTI at the high school level and the nature of those supports): _____

_____

_____

_____

_____

Does the document describe how parents are to be involved in this process? If so, summarize briefly:

_____

_____

_____

_____

Please describe other information provided:_____

_____

_____

_____

_____

NOTES

1. Public Law 108-446, Section 614(b)6. First passed in 1975 as the Education for All Handicapped Children Act, the Individuals with Disabilities Education Act (IDEA) goes through periodic reauthorization cycles. The 2004 reauthorization, the Individuals with Disabilities Education Improvement Act, also permits local education authorities to use up to 15 percent of IDEA funds under Part B to provide coordinated early intervention services. IDEA defines a specific learning disability as "a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written . . ." (p. 118, Stat 2657).

2. Although the Illinois plan did not specify which other disabilities might be identified through the RTI process, the IDEA recognizes the following categories in addition to specific learning disabilities: autism, deaf-blindness, deafness, emotional disturbance, hearing impairment, mental retardation, multiple disabilities, orthopedic impairment, other health impairment, speech or language impairment, traumatic brain injury, and visual impairment.

3. The respondent did not specify the funding sources. Special education receives categorical funding from both federal and state revenue streams.

4. The strategic instruction model was developed by Don Deshler and colleagues at the Center for Research on Learning, University of Kansas. See www.ku-crl.org/sim/ for more information.

5. See www.illinoisaspire.org. Illinois's ASPIRE is funded by a state personnel development grant from the U.S. Department of Education Office of Special Education and Rehabilitation Services.

6. Even Start is a national family literacy program that integrates early childhood education, adult literacy, and parenting education to low-income families with children under age 7 through school-community partnerships. ESPIRS collects common data at all Even Start sites.

7. For more information see www.pattan.net/teachlead/ResponsetoIntervention.aspx.

8. State documents provide no further information regarding this developing program.

9. See www.ideapartnership.org/report.cfm?reportid=309.

10. Westat and Abt (2007, appendix I) identified Pennsylvania's Instructional Support Teams as "one of the oldest models of problem-solving models in practice."

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