GEP CENTER FOR EVALUATION SPECIAL REPORT

Indiana's Vision of Response to Intervention

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APRIL 2009

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CEEP SPECIAL REPORT SERIES ON INDIANA'S VISION OF RTI . . .

- ✓ Indiana's Vision of Response to Intervention
- ✓ The Core Components of RTI: A Closer Look at Evidence-based Core Curriculum, Progress Monitoring, and Data-based Decision Making
- ✓ The Core Components of RTI: A Closer Look at Leadership, Parent Involvement, and Cultural Responsivity

INTRODUCTION AND BACKGROUND ON RESPONSE TO INTERVENTION

Response to Intervention (RTI) is a school-wide, integrative approach to instruction and intervention that provides a continuum of services to all students, both within general and special education (Martinez, Nellis, & Prendergast, 2006). Further, RTI focuses on the frequent monitoring of student progress using formative* and summative*1 assessments, and providing students with differentiated and evidence-based classroom instruction. Thus, RTI can be viewed as a framework of service deliverv for addressing the needs of all students which embeds best practice and effective instruction in the classroom as well as scientific, research-based intervention. The Indiana Department of Education (IDOE, 2009) states that the **RTI** framework is:

"...for prevention, advancement and early intervention which involves determining whether all students are learning and progressing optimally academically, socially, emotionally, and behaviorally when provided with high quality instruction that addresses all aspects of the students."

The RTI framework is often conceptualized as a triangle with three (or more) tiers, where the first tier (Tier 1) includes the core curriculum that all students receive (and approximately 80 percent of students "respond" to). Of the students who do not respond to the core curriculum, approximately 15 percent of students respond to Tier 2 services which include supplemental supports and interventions. The third tier of the framework includes individualized and intensive service delivery for approximately five percent of the student population who do not respond to Tier 1 or 2 interventions (see Figure 1). Currently, the IDOE conceptualizes RTI as being a tiered model of service delivery for all students, consisting of three to five tiers.

RTI is a framework that is to be used for every student in a school, from the low achieving to the high performing students, and everyone in between. This implies that high achieving students may be "at risk" by not reaching their full potential in a particular area. Thus, "at risk" is not a terminology that is used solely with students who are considered to be low performers; rather it is a term that may be applicable to any student. The IDOE (2009) defines all learners to include: low incidence students, high ability students, minority students, English language learners, children of poverty, students who may be disproportionately placed in special education, as well as those students who do not hold unique characteristics and perform at grade level in the regular classroom.

Shores and Chester (2009) emphasize the importance of conceptualizing RTI as a systems change. They state that "taken seriously and implemented effectively, [RTI] has the potential to transform classrooms into highly effective, highly motivating arenas of learning" (pg. 1). The authors caution against schools partially implementing RTI—they suggest that the RTI approach will be most effec-

^{1.} **Note**: Terms followed by an asterisk (*) are defined in the Glossary.

tive when every component of RTI is fully implemented and with high fidelity. In order to create this systems change, there must exist a commitment within both districts and schools to evaluate the responsibilities of school personnel. This includes training, reallocating available resources, and altering teaching philosophies to see *all* students succeed to their potential.

In the report, Closing the Achievement Gap Series: Part II: Response to Intervention (RTI)—Basic Elements, Practical Applications, and Policy Recommendations, Martinez et al., (2006) introduced the support for an RTI framework, including basic principles and components. They addressed tiered intervention service delivery, and provided examples of model RTI sites as well as recommendations for future implementation efforts. In recognition of its utility and benefit for all students, the RTI framework has gained momentum across the country since the issuance of that report. In this first report of a three-part Special Report Series on RTI in Indiana, the research on the effectiveness of RTI is examined in greater depth. A discussion of the current status of federal regulations regarding RTI, a summary of Indiana's compliance efforts and adaptations of the RTI framework, and a description of the core components of RTI follow. The report concludes with brief information regarding the stages of implementation, the importance of fidelity of framework implementation, parental involvement, and a few of the common misconceptions regarding RTI.

Evidence Supporting the Effectiveness of RTI

Due to the fact that there is no one absolute framework of RTI, school districts and states have implemented different RTI approaches. Hughes and Dexter (2006) reviewed 11 published articles on the effectiveness of various RTI approaches (field studies). In their review, they found that despite differing approaches and frameworks of RTI, all of the field studies identified some level of improvement in student performance or achievement. This finding suggests that tiered intervention programs may aid students' academic performance; however, there is a need for more sound research procedures and designs to be used to control for outside variables that may be associated with student academic performance improvement. In addition, Hughes and Dexter found that across most of the 11 field studies, researchers acknowledged common key factors that they found important in RTI programs, including: extensive and ongoing professional

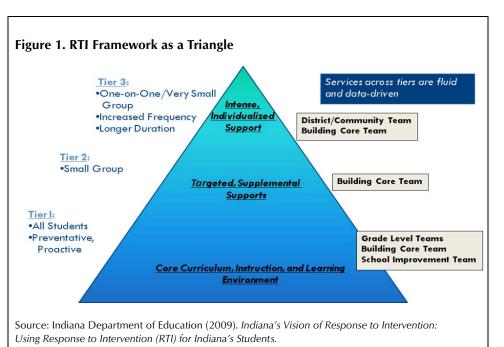
development, administrative support at both the system and building level, teacher buy-in and flexibility with their traditional instructional roles, schoolwide personnel involvement, and adequate meeting time for coordination.

Fuchs, Compton, Fuchs, Bryant, and Davis (2008) also found promising evidence to support the effectiveness of RTI. Their longitudinal study highlighted the gains of a cohort of first graders in a Tier 2 intervention program. These first graders made gains in reading during the spring semester of that school year. The gains were maintained through Grade 2.

FEDERAL LAW: NCLB AND THE INDIVIDUALS WITH DISABILITIES EDUCATION IMPROVEMENT ACT

At the federal level, the No Child Left Behind Act of 2001 (NCLB; PL 107-110) requires states to closely monitor their schools to determine whether students are, in fact, given the opportunity to learn and are learning. The Act, which was signed into law on January 8, 2002, is founded on four main principles, which are: accountability for results, more choices for parents, greater local control and flexibility, and an emphasis on doing what works based on scientific research. NCLB holds schools accountable for their students' educational outcomes, which are measured by statewide assessments, such as ISTEP+ in the state of Indiana, by providing achievement information for Adequate Yearly Progress (AYP) computations. The status of each school in every district is in part determined by the progress of their students. Schools that do not demonstrate AYP after two years may face sanctions if they receive funding from Title I.

NCLB has been perceived by many parents, advocates, and educators as "the most significant piece of legislation that affects the education of students with disabilities since the passage of the first Individuals with Disabilities Education Act (IDEA) legislation in 1975" (Cole, 2006) because assessment data from stu-



dents with disabilities are included in determining AYP. NCLB requires the disaggregation of the data into subgroups based on race/ethnicity, income, LEP (Limited English Proficiency), and special education. Thus, similar to RTI, NCLB calls for the examination of achievement data for all students.

NCLB focuses on providing evidencebased curricula and instruction to all students by highly qualified teachers and staff. Evidence-based curricula taught by highly qualified teachers are also important in effective RTI frameworks. In fact, the IDOE notes evidence-based curricula (and instruction, intervention, and extension) as being one of the core components of Indiana's RTI framework.

Another federal law, IDEA 2004 (regulations published in 2006), states that local education agencies may consider a child's response to research-based intervention as part of the process to determine whether a child has a specific learning disability (SLD), and that states may use other alternative research-based procedures for determining whether a child has an SLD. Furthermore, the new regulations establish that states are not required to use an IQ-achievement discrepancy to determine whether a child has an SLD (U.S. Department of Education, 2007).

Regulations in the 1977 Federal Register first introduced the idea of a 'discrepancy formula' (the discrepancy between IQ and achievement) to determine whether students had an SLD and were eligible for special education. Until the recent reauthorization of IDEA 2004, this discrepancy formula had been widely accepted and used for categorizing students as having an SLD. However, many practitioners and researchers have argued that the discrepancy formula is flawed. A primary argument put forth is that this formula withholds access to intervention until the discrepancy between IQ and achievement is evident in student performance, thus delaying services. This approach, commonly referred to as the "wait to fail" model, reinforces failure, ultimately making remediation much more difficult (Strangeman, Hitchcock, Hall, & Meo, 2006). Another flaw of the discrepancy formula is that there is empirical evidence stating that the formula is not reliable in differentiating students who actually have reading disabilities from those who do not (and are simply lacking effective instruction), and does not predict students' response to remediation (Velluntino, Scanlon, & Lyon, 2000).

In addition, some have argued that there is overrepresentation of some minority students in special education programs when using the discrepancy model (Batsche et al., 2007) due to the content and normed groups of IQ tests. Others have argued that there are inconsistent processes between states for determining eligibility for special education services due to the lack of clear definitions in the federal regulations (i.e., how severe should a "severe discrepancy" between academic achievement and intellectual ability be?) (Martinez, Nellis, & Predergast, 2006). Unlike the discrepancy model, RTI utilizes integrated and continuous assessment and data collectionit incorporates universal screening tools for school subjects such as mathematics and reading, uses diagnostic assessment, and includes ongoing student progress monitoring throughout the academic year (typically 2-3 times/year for all students, and more frequently for those receiving Tier 2 or 3 interventions) (Martinez & Nellis, 2008).

Zirkel and Krohn (2008) surveyed state implementation of the new IDEA regulations in terms of whether states were at the proposed (including official drafts) or finalized stage of their state law. They found that a year after the IDEA regulations went into effect (October 2007), about half of the 47 states that participated in the survey had not finalized their laws regarding the status of RTI in the SLD eligibility process. In addition, only a few states had actually chosen to require RTI and prohibit the use of the discrepancy approach. However, from additional survey responses and reports the authors gathered that many states and districts are encouraging and experimenting with RTI, even if they are not currently requiring it. In fact, states like

West Virginia, New Mexico, and New York all fall under a transitional group of states that are in the process of prohibiting the severe discrepancy method and/or requiring RTI. West Virginia, although already requiring RTI to be used in the state, is planning to prohibit the use of the severe discrepancy model beginning in June 2009, while New York will do likewise for Grades K-4 in reading beginning in July 2012. New Mexico will require the use of RTI starting July 2009 in Grades K-2.

Under this most recent revision of IDEA, districts are permitted to use up to 15 percent of their Part B funding allocated to special education to fund early intervention activities "for students in kindergarten through Grade 12 (with a particular emphasis on students in kindergarten through Grade 3) who are not currently identified as needing special education or related services, but who need additional academic and behavioral support to succeed in a general education environment" (IDEA 2004 Section 300.226(a); Fuchs & Fuchs, 2006; U.S. Department of Education, 2004). These students, according to the RTI framework, would be those who are in Tiers 2 and 3 of the three-tier model. Thus, with the regulations came the push for incorporating RTI into the school systems.

RTI is a new initiative of education service delivery that some argue has yet to be established as a unified approach of service delivery (Barth et al., 2008; Burns, Deno, & Jimerson, 2007). However, the RTI framework does hold promise, and it is important to emphasize that RTI is not a particular set of procedures; rather it is an approach to determine whether students may need certain academic interventions (VanDerHeyden, Witt, & Gilbertson, 2007). Components of the RTI approach have been in existence for more than 20 years under different names in different districts, such as the Problem-Solving Approach, Pre-Referral Intervention Approach, and Teacher Assistance Team Approach. What is different now is that the current federal law is "creating a fundamental shift in instructional delivery, so as to provide a sound foundation for quality

instruction for all students while also creating a systematic, data-driven process to determine students' specific learning needs" (Denning, 2008).

SUMMARY OF STATE RULES, GUIDANCE, TRAINING, AND TECHNICAL ASSISTANCE ACTIVITIES

Implementation of RTI in Indiana

Indiana has recently aligned its state administrative code laws to that of IDEA 2004 in prohibiting the use of the discrepancy model to guide decisions regarding eligibility for services. Furthermore, the frequent reference in NCLB to scientific, research-based methods has appeared in many state documents. In accordance with these state and federal requirements, a number of schools are either in the process of implementing, or have in place, a framework for RTI.

Indiana State Law and Articles 4 and 7

Early intervention services are an important area discussed by IDEA 2004 and by state rules in Indiana. The 2000 Indiana Administrative Code Article 4 Rules for Indiana touch on the importance of early intervention for all students. Article 4 rules speak to Student Assistance Services-that is, services such as prevention, intervention, assessment, and referral, coordinated by a certified school counselor, school psychologist, or master's level school social worker for students at the elementary and secondary school levels. These services, as the rule states, "prevent or alleviate problems that interfere with student learning" (511 IAC 4-1.5-1 (g)). Therefore, although RTI is still a fairly new approach in the state of Indiana, student assistance services that promote prevention, intervention, assessment, and referral are not a new concept.

To align state law with IDEA 2004, the Indiana Administrative Code Article 7 Rules for the state of Indiana adopted in 2008, replaced the "general education intervention" language with the terms "comprehensive and coordinated early intervening services," and emphasize the utilization of assessment information on students' response to scientific, researchbased interventions (Article 7, 511 IAC 7-40-2). The previous Article 7 special education rules published in 2002 for the state used the "general education intervention" language, which was defined as the written system at the building level of methods and procedures used with students to address components of students' classroom performance that are negatively affecting the educational outcome of those students (Article 7, 511 IAC 7-17-40). This process of intervention often started only when the classroom teacher noticed that a student was struggling with his/her class work. However, with RTI, intervention begins with school-wide assessment measures to help determine which students may need extra services, thus promoting a preventionfocused approach (IDOE, 2008a).

In identifying students with an SLD, the revised Article 7 states that an SLD can be evidenced through inadequate progress to meet age or grade level standards when using a method based on students' response to scientific, researchbased intervention in areas such as reading, written expression, math, oral expression, or listening comprehension. Another way an SLD can be evidenced is through observing a pattern of strengths and weaknesses in performance and/or achievement relative to age, grade level standards, or intellectual development. The pattern must be determined by a multidisciplinary team to be "relevant to the identification of an SLD," where the multidisciplinary team is "prohibited from using a severe discrepancy between academic achievement and global cognitive functioning to meet this requirement" (Article 7, 511 IAC 7-41-12(a)). Thus Indiana has prohibited the use of severe discrepancy and is encouraging the use of RTI in schools.

Current and Upcoming State Education Agency Activities

In collaboration with the IDOE, the Collaborative Problem Solving Project at the Blumberg Center, Indiana State University, sponsored the first days of training of the 2008-09 RTI Academy in October. Over the course of the three-day training, over 500 Indiana educators attended, representing 53 schools and 34 corporations. These educators attended the winter Academy sessions, and an additional session will be provided May 12-13, 2009. In addition to training through these sessions, Academy members receive ongoing coaching support in their schools. For more information about the RTI Academy, feel free to visit http:// www.doe.in.gov/indiana-rti/ about.html.

The RTI Academy is designed to support school leadership teams in the implementation of evidence-based practices in the six components of Indiana's vision of RTI (see "Key Components of RTI"). Schools participating in the RTI Academy are preparing to serve as demonstration sites for other Indiana schools, will provide resources and materials on the IDOE RTI website, www.doe.in.gov/ indiana-rti, and will present at a statewide conference in May.

The IDOE, in collaboration with the State of Indiana RTI Leadership Team, has been working to create a guidance document to assist Local Educational Agencies (LEAs) and school personnel with RTI implementation. This document, titled *Indiana's Vision of Response to Intervention*, provides a conceptual framework and valuable information on developing, designing, and implementing best practices to increase student achievement. The document and many other resources are available electronically at the following Web address: http://www.doe.in.gov/rti.

KEY COMPONENTS OF RTI

To respond to the changes in federal and state law, and to provide guidance to school districts, the IDOE has put together a framework of RTI that addresses six core components. These components have been validated by best practice and the body of research on RTI, and include: evidence-based curriculum, instruction, intervention, and extension; assessment and progress monitoring; data-based decision making; leadership; family, school, and community partnerships; and cultural responsivity.

Barnes and Harlacher (2008) argue that although RTI approaches vastly differ, exploring the principles on which RTI is built helps to clarify much of the confusion around RTI and its implementation. These authors list five core principles that every RTI model embraces. First, these authors suggest that RTI should not be viewed as a constricted modelrather, it should be accepted as a flexible approach that incorporates these five principles. They suggest that there is a heavy emphasis on what RTI should look like, rather than answering why it is implemented. A proactive and preventative approach to intervention is necessary because it is most beneficial for students and educators if students are given adequate instruction *before* they start to show academic deficits. Second, in order to prevent these academic problems from emerging, educators must make sure there is an appropriate match among students' skills, the curriculum, and instruction. Third, information about how students are progressing and whether there are gaps between student performance levels and expected performance levels are examined. These data help educators and multidisciplinary teams make valid decisions about how best to address problems. Fourth, schools should only utilize effective and evidence-based practices. Lastly, RTI is used school-wide to ensure that all students' needs are being met, and to proactively decrease the number of current and future cases of academic problems among students.

Evidence-based Core Curriculum, Instruction, Intervention, and Extension

The IDOE has defined evidence-based curriculum, instruction, and intervention as those materials and practices that have been seen through research as most effective in helping students learn. Extensions are designed for high ability students whose needs are not met with the current core curriculum. They are a clearly planned and articulated progression of experiences that are accelerated and enriched, and are included in content-based curricula. One defining characteristic of evidence-based curriculum, instruction, and intervention is that the measures are preventative and proactive. Another characteristic is that it targets both supports and intensive individualized interventions for some students.

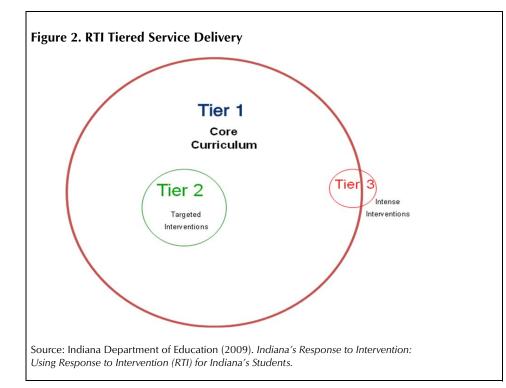
> The IDOE has defined evidence-based curriculum, instruction, and intervention as those materials and practices that have been seen through research as most effective in helping students learn.

In the core curriculum, all students should be receiving high quality classroom instruction involving characteristics such as those that Denton (2008) describes in her article on classroom reading instruction for supporting struggling readers. Teaching students essential skills and strategies, providing differentiated instruction* based on students' assessment results and their instructional needs, providing explicit and systematic instruction with a lot of practice (both with and without teacher support and feedback, and including cumulative practice over time), and allowing opportunities to apply those skills and strategies in reading and writing meaningful text with teacher support (i.e., monitoring student progress regularly and re-teaching on an as-necessary basis) are essential to ensure high quality classroom instruction. The core curriculum is used by all students. When universal screening and curriculum-based measurements are administered and students are found to be "nonresponsive" (i.e., when their data, once plotted on a graph, show no slope/negative slope/ does not "match" with expected slope based on local/national norms), they are provided with support in Tier 2.

Assessment and Progress Monitoring

Assessment and progress monitoring is defined by the IDOE as a way in which to both measure learning and aid in the decision making process. Some of the characteristics of the assessment and progress monitoring component of RTI are: school-wide universal screening for all students to determine the effectiveness of the core curriculum and to identify students who may need supplemental guidance in the form of intervention and/ or extension; and progress monitoring including frequent, ongoing data collection to evaluate effectiveness of instruction and intervention, with attention paid to the fidelity of implementation.

There are a variety of universal screening and progress monitoring tools to determine what type of services students should receive (for example, Tier 1, 2, or 3). Johnson, Mellard, Fuchs, and McKnight (2006) state that universal screening measures should be accurate in their ability to identify students whose performance on the measure calls for more indepth analysis (i.e., possible "at risk" students). The accuracy is determined in part by the cut score, which is the score that represents the dividing line between students who may be at risk, and those who are not. In addition to accuracy, screening measures should also be efficient, that is, be easily and quickly administered by



teachers. Progress monitoring encompasses the use of brief, repeated sampling of student performance on a single core task from the curriculum (i.e., curriculum-based measurements) to help assess the various skills covered in the curriculum. Progress monitoring is a valid and efficient tool that is scientifically based for finding out how effective instruction is, determining whether instructional modifications are needed, and providing important information for future student placement decisions (Hosp, 2007).

One of the more familiar frameworks of RTI consists of three tiers of service delivery, often conveyed through an RTI triangle model. However, RTI can also be conceptualized as a circle, with the core curriculum (Tier 1) as the main circle and Tiers 2 and 3 being part of the main circle, to emphasize that students receiving services at Tiers 2 and 3 also engage in the core curriculum. There is a small portion of students receiving Tier 3 interventions that are outside of the core curriculum (i.e., alternative curriculum as specified in their individual education plan) (see Figure 2). At Tier 1, all students receive core curriculum instruction, although not everyone learns successfully. Approximately 80 percent of students in general education will succeed without supplemental support; however, for the remaining 20 percent of students additional support is needed. Monitoring student progress more frequently for these students will help teachers and other personnel determine whether students are progressing with supplemental interventions. Within this 20 percent of students who need supplemental interventions, about 15 percent will be successful and continue to progress with the interventions (Tier 2). However, the remaining 5 percent will need additional support. These students at Tier 3 may be eligible for special education services. Some frameworks of RTI even have Tier 3 set up as special education (Fuchs & Fuchs, 2007).

Data-based Decision Making

Data-based decision making, which has been defined as a systematic and ongoing process of data analysis and evaluation to help inform important educational decisions, is another core component of RTI. Some key characteristics of data-based decision making include: comparing student data with expected benchmarks* or goals to determine whether a problem exists, deciding what factors contribute to the problem area, developing ways to address these factors and implementing instructional strategies/intervention plans with high fidelity, and evaluating the outcome to assess whether the intervention or extension worked with the student.

Data-based decision making is what occurs as a result of progress monitoring, where school-wide, multidisciplinary teams that include both general and special education teachers review individual students' assessment data to inform decisions about intensity of instruction and interventions (Martinez & Nellis, 2008). These teams use a problem-solving process to determine what type of service each student should receive. At each level or tier, the process is essentially the same-teams determine the magnitude of the student's problem, analyze the causes of it, design a goal-directed intervention which they conduct with fidelity, monitor the progress, modify the intervention on an as-needed basis after examining student responsiveness, and evaluate the intervention's effectiveness and plan future actions (Fuchs & Fuchs, 2006).

Leadership

Leadership is defined by the IDOE as a core component of RTI because it helps educators, staff, parents, community members, and students to envision and realize that high student achievement is possible for all students. Effective school leadership enables students to be successful both within the school as well as outside. Some key characteristics of leadership include: creating and maintaining a safe environment that encourages understanding, responsibility, and compassion for everyone; having the courage to stand up for students' rights even when faced with adversity or resistance; and listening and communicating the mission of the school.

According to the IDOE guidance document, implementation of RTI components requires a commitment from the whole school (and the community), as it is a general education initiative. A successful RTI system should have teachers, specialists, paraeducators, administrators, and parents all working together to support each student throughout their education (Bergeson, 2006). Research also states that because RTI is a schoolwide commitment to move the attention from identifying students' deficiencies to identifying scientifically-based instructional practices that support all students' learning, it is vital that all professionals in the schools receive ongoing professional development (Duffy, 2007).

Family, School, and Community Partnerships

The IDOE lists family, school, and community partnerships as one of the six core components of RTI. The agency defines these partnerships as collaborative relationships and activities that benefit all parties involved, keeping in mind the student's best interest. Some characteristics include: strategic and collaborative planning, implementation, and evaluation of RTI components with frequent and open lines of communication; respect for all cultures, abilities and experiences; and a constant belief that families have both the desire and the ability to add to their child(ren)'s success.

The National Association of School Psychologists (NASP) also explains the importance of collaboration between the home and school environments for all parties involved—the student, parent(s), and teacher. They state that cross-culturally, when families are involved in students' education, the benefits reach not only the students, but also the educators, as well as families. Students show more positive attitudes toward learning and school, higher achievement as well as test scores, improved behavior, increased homework completion, more participation in academic activities, higher rate of school attendance, and fewer placements in special education.

Cultural Responsivity

The sixth core component of Indiana's RTI framework is cultural responsivity, which the IDOE defines as a component

that, similar to leadership and family, school, and community partnerships, is applicable to every aspect of education-the core curriculum and instruction, data-based decision making, as well as assessment and progress monitoring. Cultural responsivity is a process that includes participating in conversations about race and equity, self-reflection regarding culture and beliefs, and gaining awareness of other cultures. Some key characteristics of cultural responsivity include: recognizing students' cultural identity in classroom activities and instruction; highlighting not only student differences, but also their commonalities; being aware of the ways in which one's own cultural values/views affect practice; and communicating with families in culturally meaningful ways.

Schools need to provide education to staff and families that encourages understanding and celebration of diverse family forms, cultures, ethnicities, linguistic backgrounds, and socio-economic status. Seeing diversity as a strength that provides multiple perspectives and information about a child should be valued. With regard to working with English Language Learners (ELLs), there are many different types of programs in which they can be placed to support their learning. Within these programs, there are different approaches that use varying degrees of support. Therefore, when implementing RTI with ELL students, it is necessary to understand what type of support program students are enrolled in, how their native language and their English proficiency are assessed and monitored, as well as the core literacy program they receive in their native language and/or English.

When implementing RTI with ELL students, some recommendations include: ongoing professional development for teachers (especially those in ESL and bilingual education programs) and other school personnel that would provide information regarding the development of oral language, early literacy, students' home language, contextual considerations, and the cultural background of students. Another recommendation is the development of a problem-solving team with members who have experience with and knowledge about working with ELLs (Vaughn & Ortiz, 2008). Further, as previously stated, one flaw of the discrepancy model is that it may over-inflate the number of minority students in special education. Because RTI encourages the use of evidence-based curriculum and instruction that attends to cultural differences, it has the power to address the concerns about the disproportionately large number of minority students receiving special education services (National Center for Culturally Responsive Educational Systems, n.d.).

STAGES OF IMPLEMENTATION

When implementing the RTI framework it is necessary to start with an inventory or evaluation of the preparedness of the corporation or school. The IDOE (2008a) states that each corporation or school should create a comprehensive framework for implementing RTI that includes an evaluation of the current infrastructure relative to leadership, teaming, curriculum, screening, and professional development. Kurns and Tilly (2008) recommend in the Response to Intervention Blueprints, that in order for RTI implementation to occur, a school's comprehensive framework should involve three components: consensus building, infrastructure building, and implementation.

<u>Consensus Building</u>. The first component focuses on schools having time and support available to build consensus, the tools accessible, and an understanding of the process and importance of building consensus. Consensus can be gained by providing information and coordinating with district administration, providing information to school personnel about RTI, identifying the agreement level among school personnel needed for RTI implementation, determining the next steps, and planning to support change initiative.

(continued on page 10)

Policy Perspective

WHAT RTI LOOKS LIKE AT ONE URBAN HIGH SCHOOL



The Metropolitan School District of Pike Township in Indianapolis, Indiana has been working diligently since 2005-06 (when preliminary discussions began) to implement the Response to Intervention (RTI). It was realized early on that implementing an initiative of this magnitude would require a collaborative effort not only from the departments and staff within our school district but also with local universities and the Indiana Department of Education (IDOE). Pike has benefited greatly from partnerships with the Blumberg Center for Interdisciplinary Studies in Special Education located at Indiana State University and Indiana University located in Bloomington, Indiana. Collaborating with partners provided Pike with a tremendous support network and brain trust with which to embark upon this journey. Thanks to a grant received from the IDOE, Pike jumped right into the process learning, growing and correcting in flight throughout the journey. Although there is still a lot to learn, Pike will share our story to support kindred spirits who are truly committed to improving the way students are served.

The MSD of Pike Township is one of the largest school communities in the metropolitan Indianapolis area, with 10,567 students, from kindergarten to high school with 14 schools. The MSD of Pike Township represents a district rich in racial, cultural, ethnic and socio-economic diversity. Pike schools have an 84.4 percent population of multi-ethnic students. The district has more than 851 international students who represent 64 countries and speak 68 languages. A current breakdown of district population is listed in the demographic data charts below.

African American	Caucasian	Hispanic	Multiracial	Asian
59%	15.5%	15.1%	7.7%	2.6%

ENL	Special Education	Free/ Reduced
14.2%	13.3%	53.1%

The key to implementing any new initiative successfully is to begin communication with all stakeholders to increase understanding, buy-in, and input from all. Listed below are some of the first steps in the **awareness and information phase** of implementation:

- Presented an overview of RTI with local teacher's association both at the district and school level highlighting the benefits:
 1)early screening and intervention to prevent and/or close achievement gaps;
 2)systemic, on-going monitoring of progress for high quality, research-based instruction;
 3)better integration between general and special education;
 4)more flexibility in resources
- Posted Response to Intervention Policy Considerations and Implementation book by the National Association of State Directors of Special Education, Inc. on the district common drive for easy staff access
- Conducted data analysis and review of all student data (grades, common assessments, ISTEP, etc.)
- Facilitated RTI book study sessions with: Principals-Assistant Principals, Speech- Language Pathologists, School Psychologists, Special Education, Title I & ESL Teachers, Guidance Counselors, Department chairs

During this awareness phase heavy emphasis was placed on data-based decision making to better meet student needs and to identify and support students early to prevent failure. This ongoing focus on monitoring student progress and putting structures in place prior to failure was a shift for all even though everyone readily agreed that it was certainly the logical thing to do.

Beth Huffman Niedermeyer, Ph.D.

It's fair to say that the initial concern for high school teachers was the fear of increasing responsibilities and tasks for educators who already have full plates. Therefore, during the implementation stage and throughout all stages, a continuing consideration is to be mindful of working smarter since most educators cannot work any harder than they already do. Listed below is an outline of the Pike High School **implementation steps** put in place:

- Created District & Building level interventions for RTI
- Developed parent & community education (meetings, articles, newsletters, brochure, etc.)
- Supported principals with monthly discussion opportunities
- Trained in Positive Behavior Supports
- Placed Cummins Mental Health in Pike Schools
- Developed Student Assistance Core Teams (with 3 days of training for team members)
- Conducted a high school focus group with area high schools to share ideas and strategies

As a result of this RTI journey at Pike High School the following **key lessons** were **learned**:

- Utilize universal screenings to determine effectiveness of core curriculum
- Model collaboration at all levels
- Increase communication
- Ensure general education teachers are well informed
- Anticipate educators who struggle with changing long-held practices & beliefs
- Support staff with changing roles (plant seeds early, ensure that they still have a job, explain the role, model the role, focus on benefits to all OUR kids.)
- Prepare to offer sustained professional development and skill building (LOTS of up front training and skill building)
- Provide on-site support and coaching (a change of this magnitude requires many venues for assistance, networking, problem solving, affirmation.)

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Policy Perspective

IMPLEMENTING RTI IN AN ELEMENTARY SCHOOL



Edgewood Intermediate School (http:// www.eis.rbbcsc.k12.in.us/), located in western Monroe County, has developed and successfully implemented a Response to Intervention program that addresses the educational and behavioral needs of all students. Support for this service delivery change came in large part from the State Implementation of Scaling-up Evidence-based Practices (SISEP) grant, awarded through IDOE. However, we began implementing RTI long before we received the IDOE award when we partnered with the school psychology program at our local university, Indiana University.

Our vision for this service delivery change began during the 2004-05 school year starting with the Edgewood Primary School, a K-2, building. During that time, teachers were trained in DIBELS to help them better identify the needs of all students so they could provide more direct instruction in early reading skills. Edgewood Primary was awarded an EPICC Grant (forerunner to State Implementation of Scaling up Evidence-based Practices) and with that award purchased direct instruction reading programs, in-service time, and additional educational support materials. The teachers and I met during grade level meetings to analyze the DIBELS data and to monitor individual student progress. Edgewood Intermediate School (EIS) houses Grades 3-5. EIS began implementing RTI during the 2007-08 school year, focusing on the third grade level. This year the program has expanded to include Grades 4 and 5. AIMSweb is the data management system used at Edgewood Intermediate School. This year's focus at EIS has been on universal screening and data analysis.

General and special education teachers at each grade level at EIS conduct the universal screening three times per year. Data generated from each screening period are used by each general education teacher to rate how each student is performing in the general education program. The teachers then design interventions for students who need additional support within the general education classroom. Last year our district, Richland-Bean Blossom School Corporation (http://www.rbbcsc.k12.in.us/), adopted a new reading curriculum that provides leveled reading programs to address the wide range of ability within the general classroom. Teachers have available to them support/instructional programs for each tier. In addition to classroom skills grouping, the grade levels are experimenting with cross-classroom grouping to better reach more students in need. Indiana University graduate students also assist our teachers in identifying very low achieving students and providing direct instructional support to those students.

Dian Casebeer

In addition to the academic RTI service delivery, these schools are using the School Wide Information System (SWIS), to monitor children whose behavior has a negative impact on their academic performance. The SWIS is a data management system that records and graphs a child's disciplinary referrals. The principal and the teachers can get universal screening information that targets behaviors and helps with functional assessments and behavior plans. The SWIS has been in use at the Primary School for the past four years and is being implemented this year at Edgewood Intermediate School.

Parent involvement is a priority for Edgewood Intermediate and is facilitated through increased home-school collaboration efforts. Parents are regularly provided with information about their child's progress and how the areas of deficits are addressed at school. Every semester, we hold a parent night for students participating in Tier 3 interventions. School personnel meet with parents prior to a psychoeducational referral to give parents more indepth information about their child and the testing. A key change in our referral question for psycho-educational assessment has changed from one of special education eligibility to one of services - that is, our primary concern is: What does this child need in order to be successful in school?

Change has been slow but steady. We have the support of administrators at the district level and the principals at both campuses. Related services personnel are working together and, most importantly, we are beginning to see a shift in the blurring of the general education special education divide. It has been so exciting to see the progress in our students and our staff!

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(continued from page 7)

- <u>Infrastructure Building</u>. The second component includes schools identifying and appointing a multi-disciplinary building leadership team whose members have appropriate training and skill development to lead RTI and support the building in working systematically through RTI guiding questions (i.e., is our core program sufficient, what supplemental instructions are needed, etc.).
- Implementation of RTI. The third ٠ component focuses on building a master schedule around the needs of the students, which includes providing interventions/extensions in addition to the core instruction. There are scheduled dates for the universal screenings, progress monitoring, data analysis, and decision making. In addition, professional development and ongoing supports are necessary for those administering assessments and providing instruction. Implementation of logistics of assessment, progress monitoring, and core/supplemental instruction are crucial, and monitoring of the implementation process is also needed. Further, collecting and summarizing data as well as ensuring open lines of communication between school personnel are important.

The IDOE (2008a) states that some school districts in Indiana have started using multi-tiered models to provide scientific, research-based interventions to struggling students. It is vital that specialists, general and special education teachers, and building principals receive the professional development necessary to implement each step of the comprehensive plan.

IMPORTANCE OF FIDELITY OF IMPLEMENTATION

To ensure program success and optimal achievement results, the implementation of RTI in any context must be done so with fidelity. All core components must be implemented with high fidelity, because without it, there is a greater chance of RTI failing at the implementation stage. With high fidelity, we assume that the integrity of screening and progress-monitoring procedures as well as evidence-based curriculum and instruction are adhered to. In addition, it is critical to identify the fidelity with which an intervention was implemented so that any significant gains in student achievement that may result can be accurately attributed to the intervention, and so that the intervention can be replicated in other schools and districts.

The National Research Center on Learning Disabilities states that there are many studies that have examined the integral role that fidelity of implementation has on the effect of intervention programs for students with learning disabilities. Most of the studies have in common three key factors: fidelity of implementation of the process (at the school level), how empirically-supported the specific intervention was, and the teacher's fidelity of intervention implementation (Johnson et al., 2006).

Reschly and Gresham (2006) provide some specific ways to help ensure fidelity of implementing an RTI model, which include linking interventions to improved outcomes (to gain credibility); definitively describing operations, techniques, and components of the intervention; defining responsibilities of specific people involved in the intervention process; creating a system for measuring the said operations, techniques, and components; creating a system for feedback and decision-making; and lastly, creating accountability measures/ sanctions for non-compliance.

There is a cycle of achieving high fidelity: if there is a high level of fidelity in implementing evidence-based curriculum and appropriate instruction, then student outcomes are better, which then leads to enhanced credibility and reliability of the curriculum and instruction program. Johnson et al. (2006) state that this, in turn, "naturally" leads to more highly motivated staff, who will continue to implement the curriculum and instructional practices with high fidelity to maintain the credibility of the curriculum and instruction.

Fixen (2008), in his October 2008 keynote address at the Indiana Response to Intervention Academy meeting, stated that student benefits in schools are realized when there is effective intervention in addition to implementation of effective educational practices. Further, performance assessments (which ensure fidelity) that provide feedback not only to the state, but also locally (i.e., to coaches, teachers, etc.), contribute to student benefits. To achieve this fidelity, competencies need to be established, which are comprised of selection of teachers (i.e., start with the most willing and able), training (i.e., quick and effective training), and coaching (i.e., necessary for training to work, since "any new behavior is so fragile").

In addition to competency, organization is a necessity. Organization, Fixen explains, includes: a decision support data system (i.e., help provide feedback to teachers on a regular basis and pro-vide information on things such as pre- and post-training measures), facilitative administration (i.e., building administrators help to support the schools and find ways to remove any barriers), and systems intervention (i.e., intervention at every level, progressing from the school to the district to the state to the federal level). Lastly, leadership is a key factor to attaining fidelity. Here the question is, "How do we provide effective leaders?" The answer is that both technical and adaptive types of leadership are necessary, with technical leadership ensuring that things are done on time, and adaptive leadership to develop consensus among leaders and narrowing down ideas to make plans more feasible. Thus, to ensure fidelity and therefore increase student benefits, Fixen suggests that three areas are of importance: strengthening competency, organization, and leadership.

Deshler (2008) notes the importance of not only ensuring that interventions are being taught correctly, but also that they are being taught with enough intensity, for the right amount of time—that is, what he calls "dosage." Deshler points to four factors that comprise dosage of intervention: group size, instructional period, frequency, and duration. He warns that possible consequences of not taking any of these four factors into consideration when designing and implementing an intervention may limit the efficacy or adversely affect an intervention. Group size refers to the student-to-teacher ratio during instruction. Increasing the group size (more than a 4:1 student: teacher ratio) can potentially lead to diminishing student outcomes due to fewer opportunities to receive corrective feedback. The instructional period is the length of each session, which can range from a few minutes to two-period blocks in middle and high schools. Deshler notes that in general, students' attention span and ability to process academic material may decrease under long periods of intervention exposure, while periods of instruction that are too short may not provide time for sufficient strategy acquisition or independent practice of the material. Thirdly, frequency, or the number of times students are instructed per week, will potentially impact outcomes as well. Lastly, duration refers to the total number and the time from start to finish, of sessions that students should be instructed.

INVOLVING PARENTS IN THE RTI FRAMEWORK

Parental involvement in the RTI framework is critical, because without their input important decisions regarding their children's education and academic/behavioral supports will be made solely by state and local education agencies, possibly leaving parents' questions unanswered. NASP is one of many organizations that provide information for parents to become better familiarized with RTI and how the framework will affect their children. In fact, Klotz and Canter (2007), in an RTI primer for parents published through NASP, emphasize the importance of strong communication between the home and school. They state that "being informed about your school's RTI process is the first step to becoming an active partner." In order to be better informed about RTI in their children's schools, these authors suggest a number of questions for parents to ask educators and administrators (pg. 3):

- 1. Does our school use an RTI process? If not, are there plans to adopt one? Here the authors caution that RTI is often referred to as a "problem solving process," or a different title such as Instructional Support Team, and that although similar to RTI, these frameworks do not use the specific RTI terminology.
- 2. Are there written materials for parents explaining the RTI process? How can parents be involved in the various phases of the RTI process?
- 3. What interventions are being used, and are these scientifically based as supported by research?
- 4. What length of time is recommended for an intervention before determining if the student is making adequate progress?
- 5. How do school personnel check to be sure that the interventions were carried out as planned? What techniques are being used to monitor student progress and the effectiveness of the interventions? Does the school provide parents with regular progress monitoring reports?
- 6. At what point in the RTI process are parents informed of their due process rights under IDEA 2004, including the right to request an evaluation for special education eligibility?

The Learning Disabilities Association of America also provides some questions that parents may want to ask regarding RTI implementation in their children's schools. These questions inquire about the options for supports within each tier of the RTI framework that the school utilizes, the provisions that are currently in place for parents to be involved in planning at the state and/or local level, the types of professional development that will be offered to educators to ensure effective implementation with fidelity, the personnel involved in the RTI decision-making teams, and the areas and subjects in which progress will be monitored.

MISCONCEPTIONS ABOUT RTI

Is RTI only a Framework for Academic Achievement?

Much of the research on RTI focuses on its use for measuring academic progress. However, RTI can also be used to address behavioral problems, especially considering the increasing number of students in special education programs with emotional disabilities (Burns et al., 2007). In fact, just within the state of Indiana, the total number of students with emotional disabilities served in public schools increased from 3,952 in the 1987-88 school year to 14,621 in the 2007-08 school year (IDOE, 2008b). As stated in an education policy brief by the Center for Evaluation & Education Policy (CEEP) and the Indiana Institute on Disability and Community (IIDC) titled "Improving School Climate and Student Behavior: A New Paradigm for Indiana Schools," schools addressing the issue of problem behaviors of their students must "move beyond reactive approaches and consider the ways in which school practices and the school environment influence student (and adult) behavior" (Washburn et al., 2007, pg. 2).

One such proactive, preventative approach is the school-wide Positive Behavior Support (PBS), a three-tiered continuum of service delivery that provides students with various strategies to help them achieve social and learning goals while preventing problem behaviors (Office of Special Education Programs [OSEP] Technical Assistance Center on Positive Behavioral Interventions & Supports, n.d.). The supports are implemented throughout the school in both classroom and non-classroom settings. PBS focuses on creating and maintaining primary (school-wide), secondary (classroom), and tertiary (individual) systems of support that improve student outcomes in areas such as personal lifestyle, health, social networks, family, work, and recreation by making problem behavior less disruptive, and desired behavior more functional. It is a systems approach to providing services to students. The PBS process highlights the importance of creating systems that support the implementation of evidence-based procedures and practices as well as fit into ongoing school reform practices.

PBS complements the academic aspects of RTI in that it is a school-wide framework of behavior support for all students. Like the RTI frameworks focused on academics, research on PBS is ongoing, and is continuously being developed, demonstrated, and tested (Sugai, n.d.). Similar to RTI approaches for academics, the first tier of support in using RTI for behavior concerns addresses all students via the development of schoolwide expectations and instruction. Additionally, supports in Tier 1, or primary prevention, utilize universal screening, which is important to identify students at risk or developing/displaying social, emotional, or behavioral problems (Burns et al., 2007). Tier 2, or secondary prevention, is used when students do not respond to primary prevention. These students engage in more intensive interventions in smaller groups of students (about 10 or more students). Functional behavioral assessments* (FBA) may be conducted at this stage to better understand students' needs and ways in which teachers can address these needs. In Tier 3, or tertiary prevention, the goal is to provide individualized supports to individual students after Tier 2 supports are found to be insufficient. Again, FBAs are created, and assessment and monitoring procedures are individualized to the needs of students. It is important to note that PBS, like RTI approaches, are implemented very differently in schools.

Is RTI Designed only for Students in Elementary School?

Another misconception about RTI is that it can only be used with students in primary education. Although RTI has been more prevalent in elementary school settings, it can be utilized across grades, from pre-K to high school (see Policy Perspectives on pages 8-9). In fact, there are some well-established Curriculum Based Measures for progress monitoring very young children in areas such as early literacy. There is a push for early intervention, partly because, as Kilburn and Karoly state in their 2008 paper on the economics of early childhood policy, the literature indicates that many children in the United States are at risk of experiencing poor outcomes. Further, experiences in early childhood tend to affect future outcomes, that is, the developmental trajectories of children can be affected by developments in early childhood. Thus, findings in the field indicate that it is truly important to have various early childhood programs that can help keep children on a strong and positive developmental trajectory and prevent poor outcomes in adulthood (Kilburn & Karoly, 2008).

One early childhood RTI approach is known as Recognition & Response, the goals of which are very closely aligned with those of RTI at the elementary school level. Namely, Recognition & Response strives to create high quality early childhood classrooms where teachers universally screen all students. Research-based interventions and progress monitoring are used with individuals who show signs of learning difficulties (National Center for Learning Disabilities, n.d.). Recognition & Response incorporates the three-tier framework of interventions, with the first level/tier providing teachers with resources for determining whether instruction for the whole class is appropriate, and helping them identify children who may require additional supports using universal screening in key language and early literacy skills. The second tier provides teachers with more specified instructional evidence-based practices to address particular problems for smaller groups of students who do not progress with the general curriculum (such as teaching phoneme segmenting to a group of 3-4 students). Finally, the third tier provides teachers with more individualized and intensive interventions for students who are not progressing with Tier 2 interventions (such as working individually with a child on phoneme blending, using prompts and direct instruction). The early literacy literature points to vocabulary development and phonological awareness as two important areas in helping pre-kindergarten children learn to read, and in preventing reading difficulties in their later years.

As Ehren (2008) and others admit, RTI is a tool that has been primarily used with elementary school-age children, more so than with pre-K children or high schoolage adolescents. Thus, it is less established as to how RTI can be used at a middle or high school level (Duffy, 2007). Duffy points out that RTI would present challenges in implementation at the high school level if it is used for the sole purpose of identifying students for a learning disability. This is in part due to the fact that, if a student had not been diagnosed as having a learning disability prior to high school, they may not have much time to respond to interventions. This is not to say that RTI is not important at the high school level. In fact, the aforementioned challenge of implementing RTI at the high school level is one of the reasons RTI is so important at this level-it may help in "catching" some of those students who had not yet been identified as having a learning disability or needing more individualized assistance. Another reason RTI is equally important at the high school level is that the students who have already been receiving services need continuous monitoring in their academic/behavioral progress to ensure that progress is being made. Lastly, due to high volumes of students moving to and from different districts, states, and even countries, it is becoming more necessary to screen students as they transition from middle to high school in order to appropriately address students' needs.

Ehren (2008) also points out that RTI is important at the high school level because literacy is vital to academic success in secondary settings. Difficulty in literacy will likely cause difficulty for the student in other academic areas. With teachers helping high school students achieve proficiency in areas such as listening, speaking, reading, and writing, they can help students access the content of the course material, ultimately avoiding more global school failure. Roberts, Torgesen, Boardman, and Scammacca (2008) discuss the finding that many older struggling readers, especially those who have had strong early reading instruction, have a decent mastery of phonemic awareness and phonics. Therefore, these students may benefit more from instructional guidance in advanced areas of word recognition and analysis such as decoding multisyllabic words than from continued work on the more elementary phonemic elements of the language. For older readers, it may be useful to focus on five specific areas of reading: (1) word study (i.e., word analysis and recognition), (2) fluency, (3) vocabulary, (4) comprehension, and (5) motivation. The last item, motivation, is of particular importance when working with high school students' literacy skills because reading comprehension requires readers to be fully engaged in the text, which requires students to be motivated to understand what he/she is reading. As older readers are faced with increasingly complex reading materials, it becomes more challenging for students with reading difficulties to be engaged in the text, thus decreasing their motivation to read.

Is RTI a Framework for Special Education Students?

Because RTI, and more generally scientific research-based interventions, are addressed in IDEA 2004 as alternatives to the discrepancy formula for determining eligibility for SLD, there is a misconception that RTI is an approach used specifically as a means of qualifying students for special education services. Prasse (2008) seems to be in agreement that this misconception exists, stating that "while RTI began as a response to addressing student outcomes for special education students, it quickly emerged as a general education initiative, as obtaining successful outcomes for students requires an integrated education system that does not operate as two distinct entities [that is, special and general education]." In fact, Prasse (2008) states in his introduction to RTI that it starts with high quality instruction and universal screening of all children in the general education classroom. It is only after all students are screened/benchmarked that students are identified as possibly needing supplemental services.

In Indiana, failure to respond to intensive Tier 3 interventions warrants consideration of evaluation for special education services. In addition, a student does not simply become eligible for special education services once they are determined as not responding to an intervention (or series thereof) in Tier 3. High-stake decisions such as determining eligibility for special education should first require a multidisciplinary team of educators and specialists within the school to explore these students' data to determine whether the students need supplemental services. Therefore, RTI is not used as simply a tracking system to place students into special education-it is an approach used in the general education classroom to ensure all students learn.

EVALUATION OF RTI IMPLEMENTATION IN INDIANA

The Center for Evaluation & Education Policy (CEEP) has been contracted by the Indiana Department of Education to evaluate data collected from the RTI Academy schools and other schools implementing RTI around the state. Findings from this evaluation study will be shared broadly so that effective strategies and best practices can be replicated broadly in the state.

A survey has been administered to school personnel across Indiana to gather information on the status of implementation of RTI in Indiana, types of assessments and interventions used, and more general questions about such issues as funding and professional development. The survey results will help to gauge the current receptivity towards RTI and where schools stand in terms of implementation of RTI.

Once the survey has been completed and analyzed, model demonstration sites will be chosen and will serve as case studies. These sites will consist of six schools participating in the RTI Academy and six other schools implementing RTI presently. Implementation approaches to RTI will be observed at these sites to determine the level of effectiveness and ineffectiveness of RTI.

The current report is the first of three special reports regarding the effectiveness of RTI in the state of Indiana. In the upcoming briefs, we will discuss in more detail the six core components that the Indiana Department of Education has determined as being integral to RTI. The next report will cover Evidence-based Curriculum, Instruction, Intervention and Extension; Assessment and Progress Monitoring; and Data-based Decision Making. The third report will conclude the series with a discussion on the remaining three core components: Leadership; Family, School, and Community Partnerships; and Cultural Responsivity.

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ACKNOWLEDGEMENTS

The authors would like to thank the following individuals for their suggestions and assistance as collaborators and peer editors of this report: Tara Rinehart, former Response to Intervention Specialist at the Indiana Department of Education; Molly Seward, ICAN Assessment Specialist of the Individualized Classroom Accountability Network (ICAN) program; and Brett Bollinger, Co-Director of Indiana State Improvement Grant (IN-SIG). We thank the members of the State of Indiana RTI Leadership Team, who reviewed drafts of this report and provided feedback, including: Michael Roach, Barbara Ross, Leah Nellis, Marilyn Edwards, and Debbie Harman. We would also like to thank the following individuals from the Center for Evaluation & Education Policy for their assistance as peer editors: Amy Beld and Michael Holstead, Graduate Research Assistants; Leigh Kupersmith, Publications Coordinator; Dr. Ethan Yazzie-Mintz, Director of the High School Survey of Student Engagement; and Dr. Jonathan Plucker, Director of the Center for Evaluation and Education Policy, respectively.

GLOSSARY

Benchmarks: Descriptions of expected levels of student performance at particular ages, grades, or developmental levels. These are often used as "checkpoints" to monitor student progress toward meeting performance goals within and across grade levels.

Curriculum Based Measurement (CBM):

Tools for measuring student progress and performance in a basic skill area such as reading fluency, spelling, mathematics, and written language.

Data-based Decision Making: Multidisciplinary team uses collected student data such as formative and summative assessments, permanent documents and records, etc. to make informed decisions regarding placement in and the movement between tiers of service delivery in an RTI framework.

Differentiated Instruction: A way of creating lesson plans that meet various ranges of students' needs. This type of instruction focuses on instructional strategies, groupings, and a variety of materials to be used to teach curriculum.

Discrepancy Formula: The difference between scores on a norm-referenced intelligence test (IQ test) and a norm-referenced achievement test. This formula was a way to identify students' eligibility for special education services after the 1977 Federal Register regulations, but since the reauthorization of the Individuals with Disabilities Education Improvement Act (IDEA 2004), this formula has been replaced with using scientific, research-based interventions as part of the identification process.

Evidence-based Curriculum/Instruction: Educational practices and instructional strategies supported by scientific research studies. Federal and state laws are pushing for more scientifically-backed curriculum and instruction.

Formative Assessment: Classroom and curriculum measures of student progress that involves continuous progress monitoring with the goal of achieving educational gains. These assessments inform data-based decision making.

Functional Behavior Assessment: Process by which personnel identify student's problem behavior, determine the function/purpose of the targeted behavior, and develop interventions to teach alternatives to the behavior.

Indiana's Vision of RTI: Indiana's RTI framework which includes the six core components of evidence-based curriculum, instruction, intervention and extension; assessment and progress monitoring; data-based decision making; leadership; family, school, and community partnerships; and cultural responsivity.

Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004): Federal statute regarding public education and services to students ages 3 through 21 with disabilities.

No Child Left Behind Act of 2001 (NCLB 2001): Federal statute regarding K-12 public education. The law focuses on four main principles: accountability for results, more choices for parents, greater local control and flexibility, and an emphasis on doing what works based on

scientific research.

Positive Behavior Support (PBS): Schoolwide Positive Behavior Support (PBS) is a three-tiered proactive and preventative approach to discipline. It is not a model or a pre-packaged curriculum, but a process to plan and implement a broad range of systemic and individualized strategies for achieving important social and learning outcomes while preventing problem behavior with all students.

Progress Monitoring: Research-based practice for assessing students' academic performance and evaluating the effectiveness of instruction and interventions. Monitoring occurs multiple times throughout each school year and results are often times plotted on a chart.

Response to Intervention (RTI): A schoolwide approach or framework for providing high quality classroom instruction and interventions to all students that involves frequent progress monitoring and evidence-based practices to meet the needs of each individual student.

Summative Assessment: A type of comprehensive student evaluation that provides accountability and is used to check the level of learning at the end of a unit of study.

Tiered Model: Commonly used model of RTI that consists of three or more different levels of instructional interventions based on students' needs. The intensity of the interventions and supports increase as one moves up in the tier number (i.e., Tier 3 is more intense of an intervention than Tier 2 or Tier 1).

Universal Screening: Type of assessment that is characterized by providing quick, low cost, repeatable testing of age-appropriate critical skills (e.g., reading a list of high frequency words) or behaviors (e.g., aggression). Testing is typically done three or more times each year (Fall, Winter, Spring) and students' screening data are compared to expected student scores (benchmarks).

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	Center on Response to Intervention p://www.rti4success.org/
	Research Center on Learning Disabilities p://www.nrcld.org/rti_practices
	chnical Assistance Center on Positive Behavioral Interventions & Supports p://www.pbis.org
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This Special Report has been executive edited by Jonathan A. Plucker, Ph.D. and published by the

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