

## Response to Intervention (RtI): Strategies to Maximize Student Progress

Administrator's Management Meeting  
St. Petersburg, Florida  
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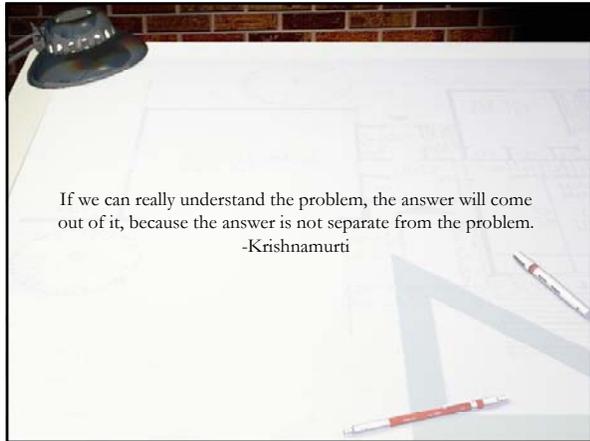
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If we can really understand the problem, the answer will come out of it, because the answer is not separate from the problem.  
-Krishnamurti

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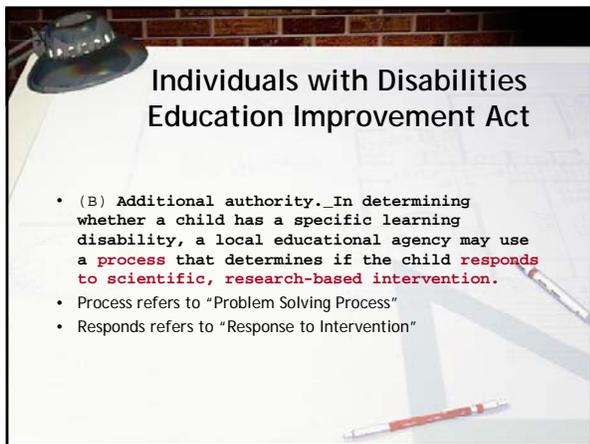
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## Individuals with Disabilities Education Improvement Act

- (B) **Additional authority.** In determining whether a child has a specific learning disability, a local educational agency may use a **process that determines if the child responds to scientific, research-based intervention.**
- Process refers to "Problem Solving Process"
- Responds refers to "Response to Intervention"

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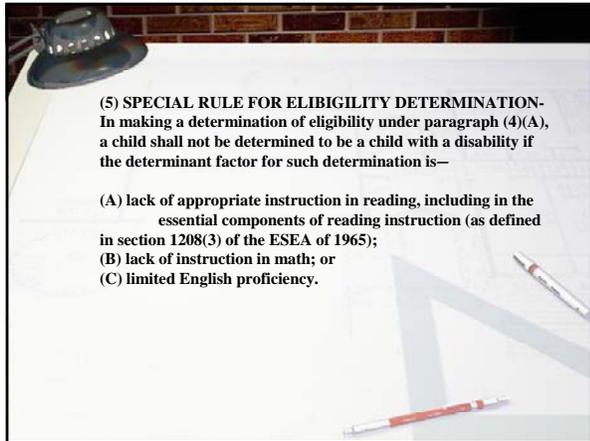
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**(5) SPECIAL RULE FOR ELIBIGILITY DETERMINATION-**  
In making a determination of eligibility under paragraph (4)(A), a child shall not be determined to be a child with a disability if the determinant factor for such determination is—

(A) lack of appropriate instruction in reading, including in the essential components of reading instruction (as defined in section 1208(3) of the ESEA of 1965);  
(B) lack of instruction in math; or  
(C) limited English proficiency.

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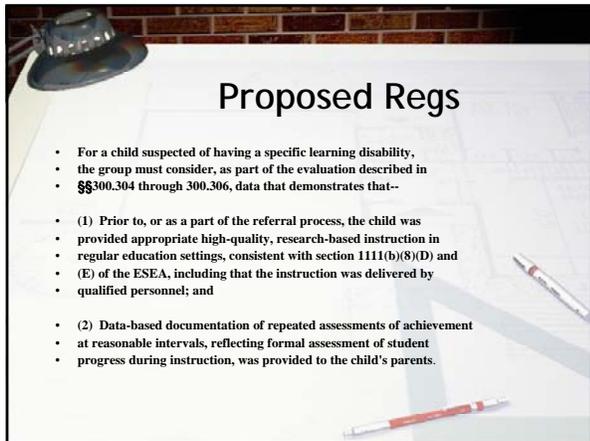
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**Proposed Regs**

- For a child suspected of having a specific learning disability, the group must consider, as part of the evaluation described in §§300.304 through 300.306, data that demonstrates that--
- (1) Prior to, or as a part of the referral process, the child was provided appropriate high-quality, research-based instruction in regular education settings, consistent with section 1111(b)(8)(D) and (E) of the ESEA, including that the instruction was delivered by qualified personnel; and
- (2) Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, was provided to the child's parents.

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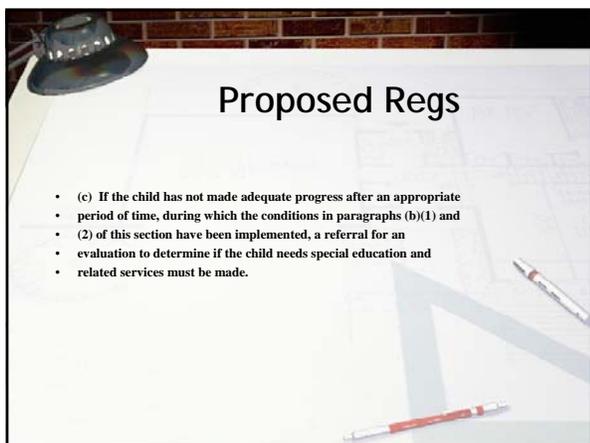
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**Proposed Regs**

- (c) If the child has not made adequate progress after an appropriate period of time, during which the conditions in paragraphs (b)(1) and (2) of this section have been implemented, a referral for an evaluation to determine if the child needs special education and related services must be made.

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## Implications

- Poor/lack of instruction must be ruled out
- Curricular access blocked by any of the following must be addressed
  - Attendance
  - Health
  - Mobility
- Sufficient exposure to and focus on the curriculum must occur
- Frequent, repeated assessment must be conducted

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## Problem Solving

- A process that uses the skills of professionals from different disciplines to **develop** and **evaluate** **intervention plans** that improve significantly the school performance of students

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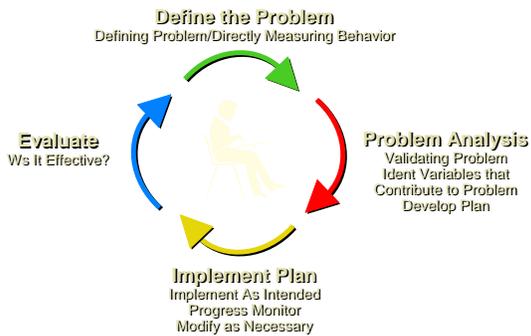
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### Problem Solving Process




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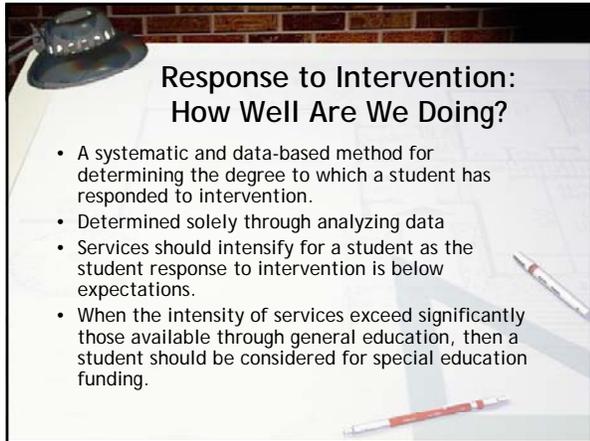
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### Response to Intervention: How Well Are We Doing?

- A systematic and data-based method for determining the degree to which a student has responded to intervention.
- Determined solely through analyzing data
- Services should intensify for a student as the student response to intervention is below expectations.
- When the intensity of services exceed significantly those available through general education, then a student should be considered for special education funding.

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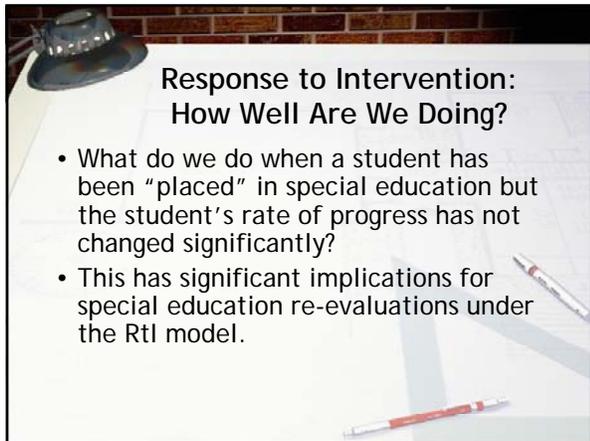
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### Response to Intervention: How Well Are We Doing?

- What do we do when a student has been “placed” in special education but the student’s rate of progress has not changed significantly?
- This has significant implications for special education re-evaluations under the RtI model.

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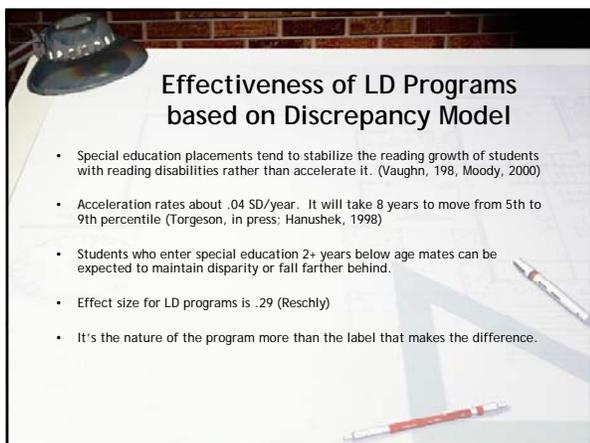
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### Effectiveness of LD Programs based on Discrepancy Model

- Special education placements tend to stabilize the reading growth of students with reading disabilities rather than accelerate it. (Vaughn, 198, Moody, 2000)
- Acceleration rates about .04 SD/year. It will take 8 years to move from 5th to 9th percentile (Torgeson, in press; Hanushek, 1998)
- Students who enter special education 2+ years below age mates can be expected to maintain disparity or fall farther behind.
- Effect size for LD programs is .29 (Reschly)
- It's the nature of the program more than the label that makes the difference.

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## Research on Problem-Solving/RtI

- Focused on accuracy of referral methods and response to proven interventions
- RtI methods (local comparisons and multiple measurement) were superior to teacher referral for problem accuracy.
- Teachers over-referred male students
- Greater proportion of African American students responded successfully to intervention relative to similarly at-risk Caucasian students. Reduced disproportional placements.
- Early intervention was powerful
- Significant reduction in LD placements  
(VanDerHeyden, Witt, and Naquin)

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## Minnesota

- Implemented in 1994
- Tracked data since that time
- Implemented multi-tiered system
- Monitored both eligibility AND student progress both in and out of special education

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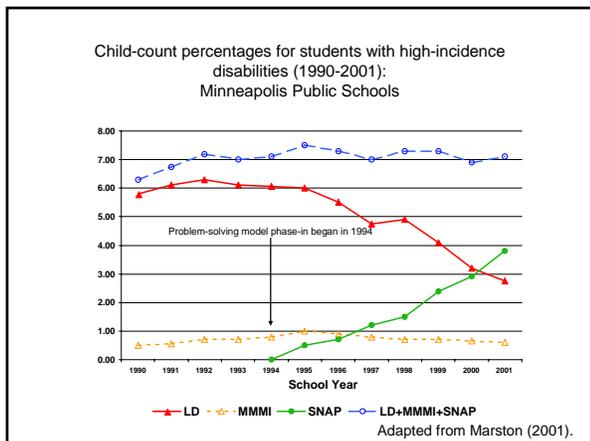
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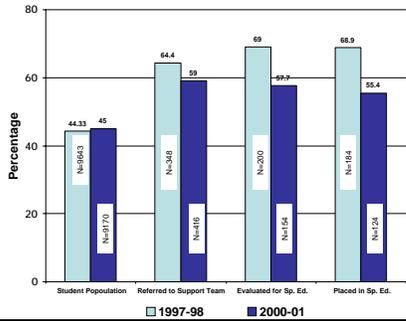
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Percentage of African-American students at each stage of referral process at 41 schools




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## Research and PSM/Rtl

- Problem identification is more accurate using the PSM (Gap Analysis) compared to simply teacher referral.
- The number of students requiring services has not diminished-- the WAY the services are provided has changed.
- Universal screening and progress monitoring practices ensure that students do not slip through the cracks
- In most cases, the percent of students receiving LD services has diminished.

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## Research and PSM/Rtl

Rtl and Traditional Discrepancy Comparison  
Amanda VanDenHeyden (2005)

	QUALIFY			Total
	Yes	No	Pending	
Poor Rtl-Refer	15	2	4	21
Good Rtl-Do Not Refer	9	15	1	25
Total	24	17	5	46

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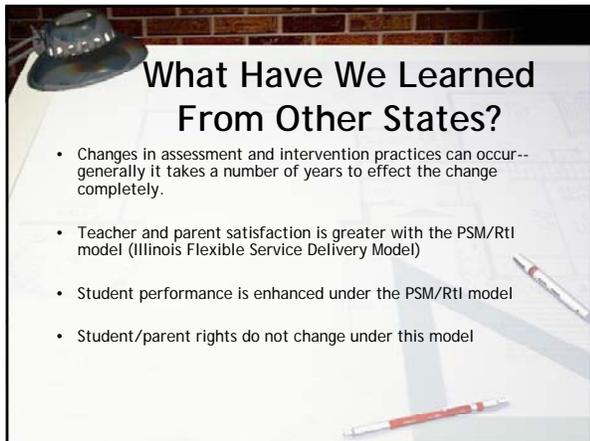
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## What Have We Learned From Other States?

- Changes in assessment and intervention practices can occur-- generally it takes a number of years to effect the change completely.
- Teacher and parent satisfaction is greater with the PSM/RtI model (Illinois Flexible Service Delivery Model)
- Student performance is enhanced under the PSM/RtI model
- Student/parent rights do not change under this model

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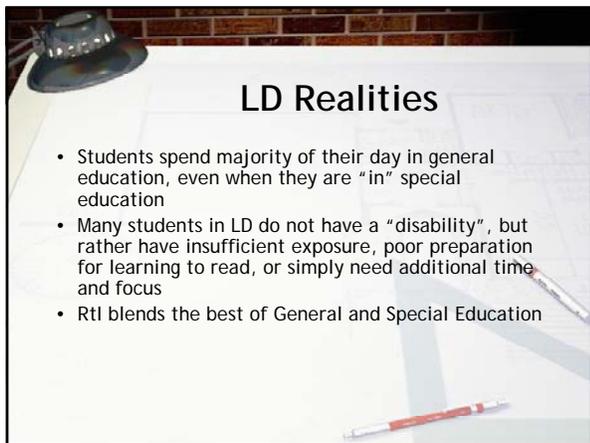
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## LD Realities

- Students spend majority of their day in general education, even when they are "in" special education
- Many students in LD do not have a "disability", but rather have insufficient exposure, poor preparation for learning to read, or simply need additional time and focus
- RtI blends the best of General and Special Education

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## RtI: The Conceptual Model

- Integrate with Core Instructional Programs and Activities in the District
  - Reading First, Early Intervention, Positive Behavior Support
- 3-4 Tiered Model of Service Delivery and Decision-Making
  - "Universal"--What all students get
  - "Supplemental"--additional focus and intensity
  - "Intensive"--modifying instructional strategies
  - "Extraordinary"-- highly specialized methods
- Problem-Solving
  - Can occur at any level
  - Increases in intensity across levels

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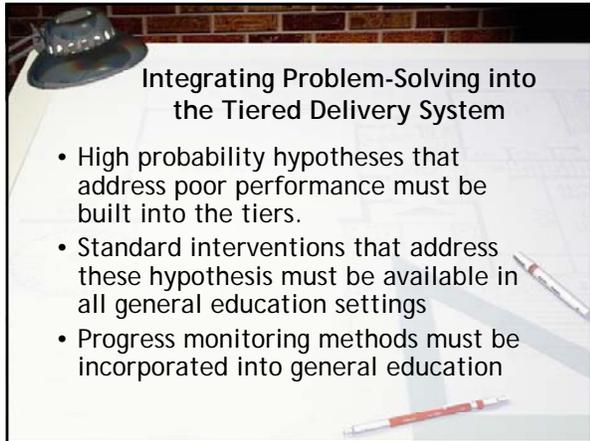
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### Integrating Problem-Solving into the Tiered Delivery System

- High probability hypotheses that address poor performance must be built into the tiers.
- Standard interventions that address these hypothesis must be available in all general education settings
- Progress monitoring methods must be incorporated into general education

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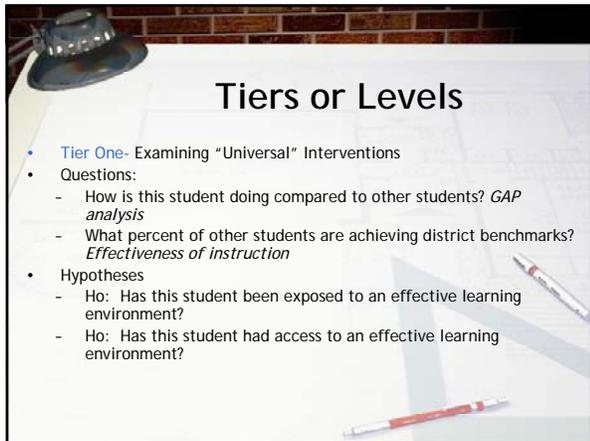
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### Tiers or Levels

- Tier One- Examining "Universal" Interventions
- Questions:
  - How is this student doing compared to other students? *GAP analysis*
  - What percent of other students are achieving district benchmarks? *Effectiveness of instruction*
- Hypotheses
  - Ho: Has this student been exposed to an effective learning environment?
  - Ho: Has this student had access to an effective learning environment?

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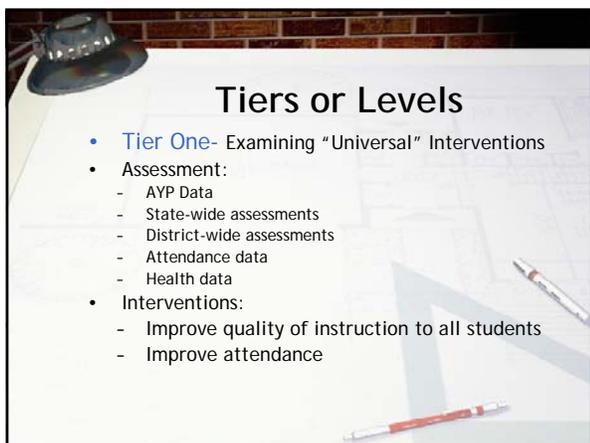
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### Tiers or Levels

- Tier One- Examining "Universal" Interventions
- Assessment:
  - AYP Data
  - State-wide assessments
  - District-wide assessments
  - Attendance data
  - Health data
- Interventions:
  - Improve quality of instruction to all students
  - Improve attendance

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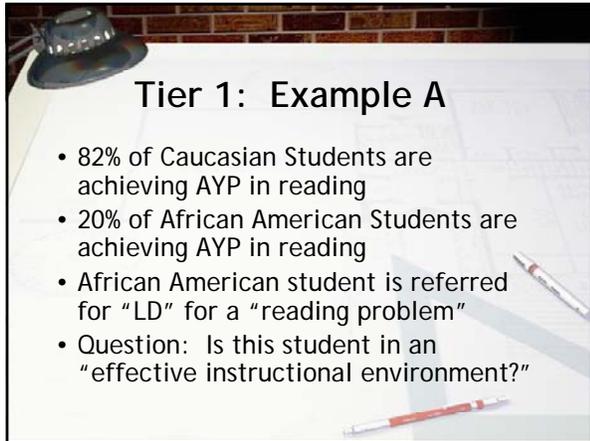
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### Tier 1: Example A

- 82% of Caucasian Students are achieving AYP in reading
- 20% of African American Students are achieving AYP in reading
- African American student is referred for "LD" for a "reading problem"
- Question: Is this student in an "effective instructional environment?"

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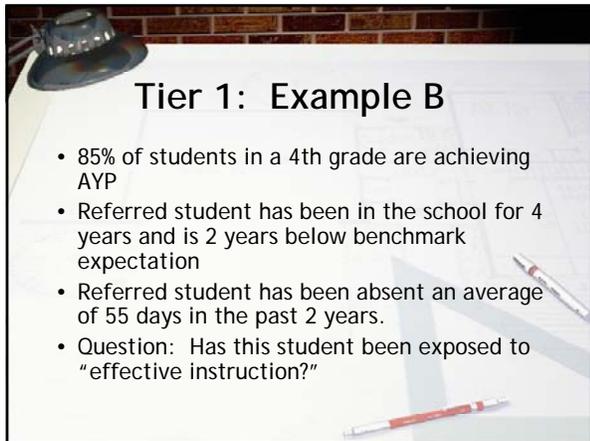
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### Tier 1: Example B

- 85% of students in a 4th grade are achieving AYP
- Referred student has been in the school for 4 years and is 2 years below benchmark expectation
- Referred student has been absent an average of 55 days in the past 2 years.
- Question: Has this student been exposed to "effective instruction?"

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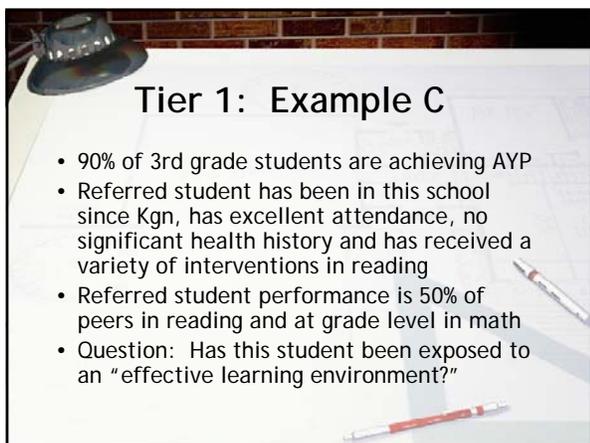
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### Tier 1: Example C

- 90% of 3rd grade students are achieving AYP
- Referred student has been in this school since Kgn, has excellent attendance, no significant health history and has received a variety of interventions in reading
- Referred student performance is 50% of peers in reading and at grade level in math
- Question: Has this student been exposed to an "effective learning environment?"

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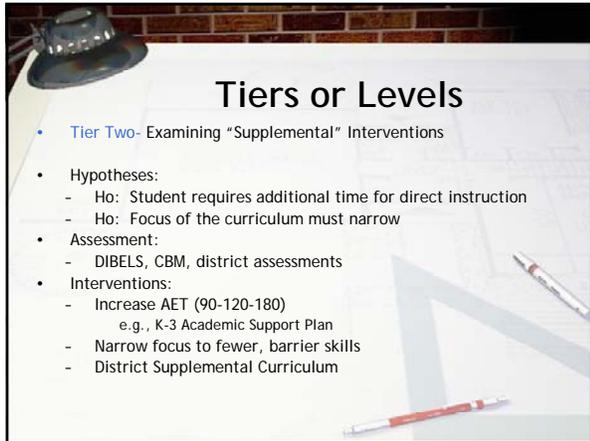
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## Tiers or Levels

- **Tier Two-** Examining “Supplemental” Interventions
- Hypotheses:
  - Ho: Student requires additional time for direct instruction
  - Ho: Focus of the curriculum must narrow
- Assessment:
  - DIBELS, CBM, district assessments
- Interventions:
  - Increase AET (90-120-180)  
e.g., K-3 Academic Support Plan
  - Narrow focus to fewer, barrier skills
  - District Supplemental Curriculum

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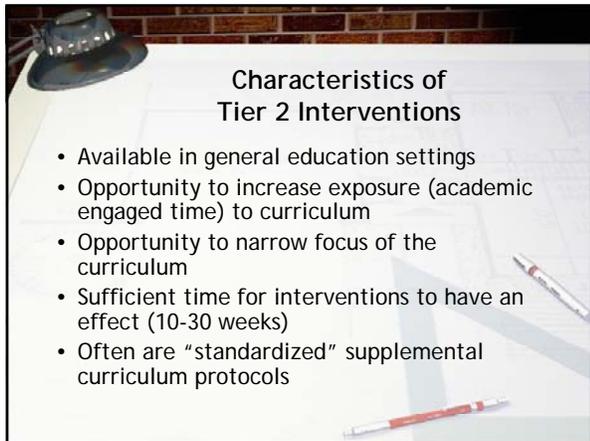
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## Characteristics of Tier 2 Interventions

- Available in general education settings
- Opportunity to increase exposure (academic engaged time) to curriculum
- Opportunity to narrow focus of the curriculum
- Sufficient time for interventions to have an effect (10-30 weeks)
- Often are “standardized” supplemental curriculum protocols

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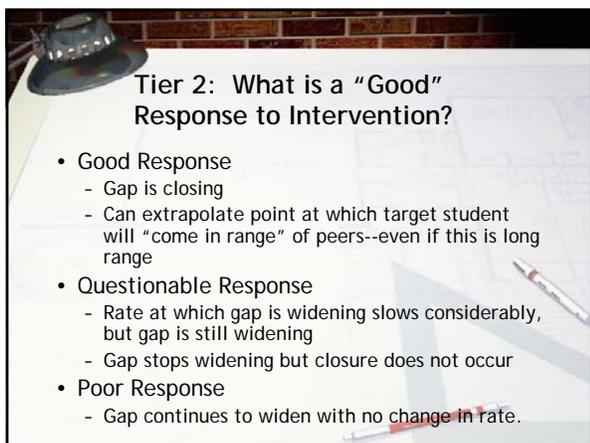
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## Tier 2: What is a “Good” Response to Intervention?

- Good Response
  - Gap is closing
  - Can extrapolate point at which target student will “come in range” of peers--even if this is long range
- Questionable Response
  - Rate at which gap is widening slows considerably, but gap is still widening
  - Gap stops widening but closure does not occur
- Poor Response
  - Gap continues to widen with no change in rate.

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## Tiers or Levels

- **Tier Three:** Examining “Intensive” Interventions
  - Hypotheses: Focus on child-specific issues
  - Assessment:
    - DIBELS, CBE, Diagnostic Assessments
  - Interventions:
    - Address verified hypotheses

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## Characteristics of Tier 3 Interventions

- Developed from individualized student problem-solving
- Assumption is that more of the “problem” lies within the student
- Goal is to find successful interventions first
- Based on “intensity” of the interventions required for student success, determination is made about eligibility for special education.
- Should comprise 4-5% of student population
- Criteria for “Good” Rtl is same as Tier 2

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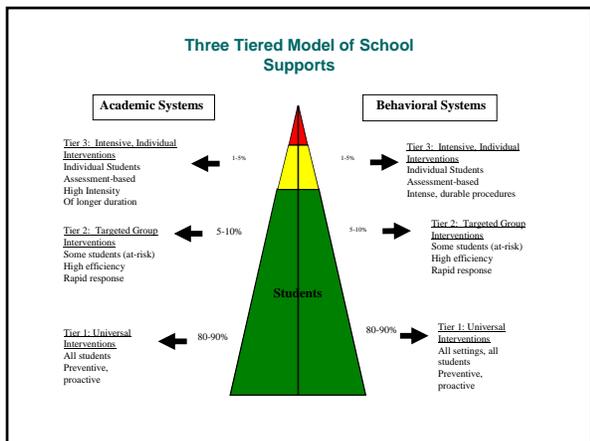
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**Example of Tier Level Interventions**

**Reading**

	Tier 1	Tier 2	Tier 3
Time	90	120	180
Curricular Focus	5 areas	Less than 5	2 or less
Curricular Breadth	Core	Core + Supplemental	Core + Supplemental + Intensive
Frequency of Progress Monitoring	Yearly or greater	Monthly or greater	Weekly

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**Labels**

- For Tier 1 and 2, students are definitely General Education Students
- Students receive "Tier" levels of intervention--they are not Tier 1 or 2 "kids"
- Tier 3 students begin to require interventions that are quite intense. Do they qualify for special education? These students can be General or Special Education Students

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**Early Intervention**

- School Readiness Uniform Screening System (SRUSS)
  - ESI-K
  - DIBELS
- Clearly Defined Developmental Standards for 3-5
- All Kindergarten Students screened with DIBELS in first 21 days of school

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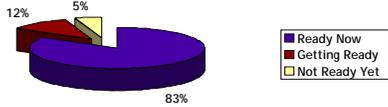
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**2004 - 05  
Florida School Readiness Uniform  
Screening System Results  
ESI-K: Students with Valid Scores  
(N=175,806)**




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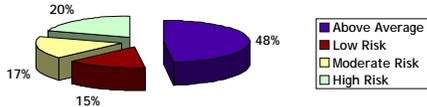
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**2004 - 05  
Florida School Readiness Uniform Screening  
System Results  
DIBELS Letter Naming Fluency: Students with Valid  
Scores  
(N=175,023)**




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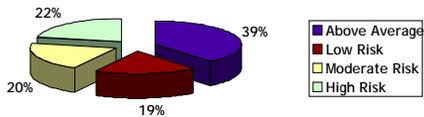
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**2004 - 05  
Florida School Readiness Uniform Screening System  
Results  
2004 DIBELS Initial Sounds Fluency: Students with  
Valid Scores  
(N=174,913)**




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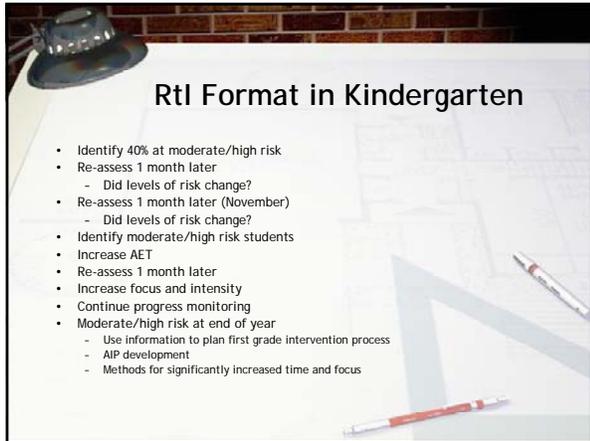
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### RtI Format in Kindergarten

- Identify 40% at moderate/high risk
- Re-assess 1 month later
  - Did levels of risk change?
- Re-assess 1 month later (November)
  - Did levels of risk change?
- Identify moderate/high risk students
- Increase AET
- Re-assess 1 month later
- Increase focus and intensity
- Continue progress monitoring
- Moderate/high risk at end of year
  - Use information to plan first grade intervention process
  - AIP development
  - Methods for significantly increased time and focus

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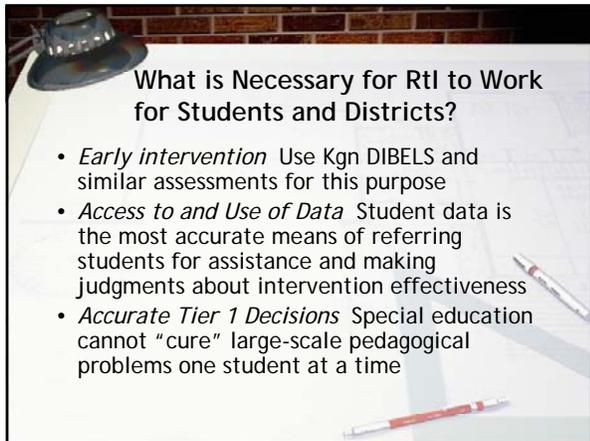
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### What is Necessary for RtI to Work for Students and Districts?

- *Early intervention* Use Kgn DIBELS and similar assessments for this purpose
- *Access to and Use of Data* Student data is the most accurate means of referring students for assistance and making judgments about intervention effectiveness
- *Accurate Tier 1 Decisions* Special education cannot “cure” large-scale pedagogical problems one student at a time

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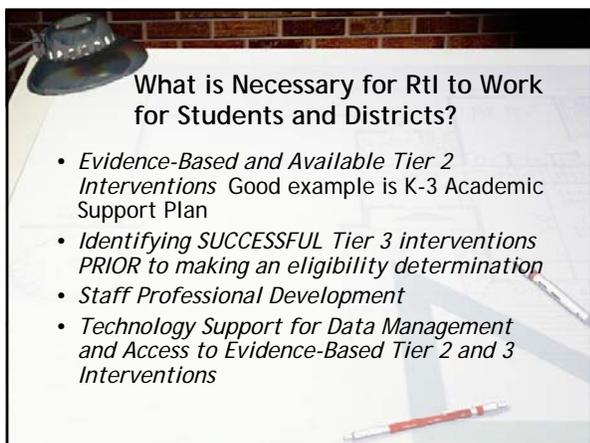
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### What is Necessary for RtI to Work for Students and Districts?

- *Evidence-Based and Available Tier 2 Interventions* Good example is K-3 Academic Support Plan
- *Identifying SUCCESSFUL Tier 3 interventions PRIOR to making an eligibility determination*
- *Staff Professional Development*
- *Technology Support for Data Management and Access to Evidence-Based Tier 2 and 3 Interventions*

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**Do We REALLY Want To Do This?**

- It Depends
- If we are interested in as many students AS POSSIBLE achieving benchmarks AND AYP--it's the best thing we have
- If we are looking to solve pedagogical management problems for diverse populations, then probably not.

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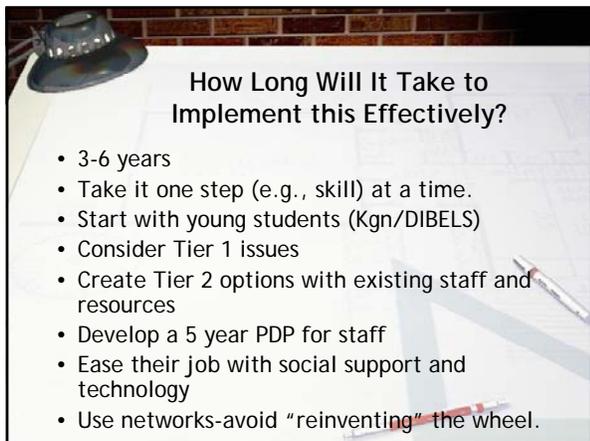
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**How Long Will It Take to Implement this Effectively?**

- 3-6 years
- Take it one step (e.g., skill) at a time.
- Start with young students (Kgn/DIBELS)
- Consider Tier 1 issues
- Create Tier 2 options with existing staff and resources
- Develop a 5 year PDP for staff
- Ease their job with social support and technology
- Use networks-avoid "reinventing" the wheel.

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