

MULTI-TIERED SYSTEM OF SUPPORTS MANUAL



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Legislation

Federal Legislation:

Response to Intervention evolves from federal changes affecting general and special education. One change involves the re-authorization of *Individuals with Disabilities Education Act (IDEA)*. Specifically:

- Focus on outcomes achieved through education in both general and special education.
- Using general education as the baseline of what is expected in special education.
- An increase in the options to provide interventions within general education
- To do this, *IDEA (2004)* allows for increasing pooling of building-based resources, including more flexibility for highly trained special service providers such as special educators to work in general education settings. Flexible funding patterns are also a critically important feature. Up to 15% of special education funds may be used in general education settings in order to provide prevention and intervention services before children are ever considered for special education.

No Child Left Behind (NCLB) provided another agent for response to intervention. Specifically, it affords:

- A focus on outcomes instead of processes.
- A strong emphasis on the acquisition of basic skills in all academic areas.
- A particular focus on reading as possibly the most critical foundational skill all children need to acquire.

NCLB focuses on the needs of diverse learners and improving outcomes for all learners. Both *IDEA (2004)* and *NCLB* emphasize using evidence based interventions and systematically measuring each child's response to these interventions that are carried out with high degrees of fidelity.

These same ideas were supported by findings of the *President's Commission on Excellence in Special Education*. As a result of the nine findings of the commission, three major recommendations were given:

- Focus on results, not on the process.
- Embrace a model of prevention, not a model of failure.
- Consider children with disabilities as general education children first.

Changes have also occurred in the way learning disabilities are identified. *IDEA (2004)* states:

- "In general. Notwithstanding section 607(b), when determining whether a child has a specific learning disability as defined in section 602, a local educational agency shall not be required to take into consideration whether a child has a severe discrepancy between achievement and intellectual ability in oral expression, listening comprehension, written expression, basic reading skill, reading comprehension, mathematical calculation or mathematical reasoning."
- "(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 as part of the evaluation procedures described in paragraphs (2) and (3)."
- "(5) Special Rule for Eligibility 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.

IDEA 2004 gives local education agencies the option of using a method called the problem-solving method to identify specific learning disabilities. This method provides for the implementation of well planned, evidence-based interventions in the general education classroom.

Florida Legislation:

Under Florida Rule 6A-6.0331, "It is the local school district's responsibility to develop and implement a multi-tiered system of support which integrates a continuum of academic and behavioral interventions for students who need additional support to succeed in the general education environment."

Specifically:

6A-6.0331 General Education Intervention Procedures, Identification, Evaluation, Reevaluation and the Initial Provision of Exceptional Education Services.

(1)(e) Evidence-based interventions addressing the identified areas of concern must be implemented in the general education environment. The interventions selected for implementation should be developed by a team through a data-based problem solving process that uses student performance data to identify and analyze the area(s) of concern, select and implement interventions, and monitor the effectiveness of the interventions.

6A-6.03018 Exceptional Education Eligibility for Students with Specific Learning Disabilities.

(5)(f) Documentation based on data derived from a process that assesses the student's response to well-delivered scientific, research-based instruction and interventions including:

1. Documentation of the specific instructional interventions used, the support provided to the individual(s) implementing interventions, adherence to the critical elements of the intervention design and delivery methods, the duration and frequency of intervention implementation (e.g. number of weeks, minutes per week, sessions per week), and the student-centered data collected; and
2. Documentation that the student's parent(s) or guardian(s) were notified about the state's policies regarding the amount and nature of student performance data that would be collected and the general education services that would be provided; interventions for increasing the student's rate of progress; and the parental or guardian right to request an evaluation.

6A-6.030121 Exceptional Student Education Eligibility for Students with Language Impairments.

(8)(f) Documentation based on data derived from a process that assesses the student's response to well-delivered scientific, research-based instruction and interventions including:

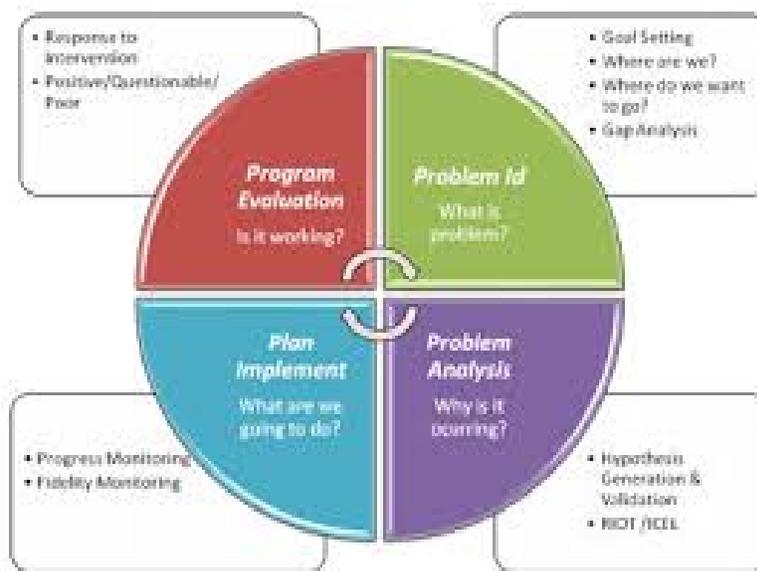
1. Documentation of the specific instructional interventions used, the intervention support provided to the individuals implementing the interventions, adherence to the critical elements of the intervention design and delivery methods, the duration of intervention implementation (e.g., number of weeks, minutes per week, sessions per week), and the student-centered data collected; and
2. Documentation that the student's parent(s) or guardian(s) were notified about the state's policies regarding the amount and nature of student performance and/or functioning data that would be collected and the educational resources and services that would be provided; interventions for increasing the student's rate of progress; and the parental or guardian right to request an evaluation.

Problem-Solving Process

Problem-Solving: A process that uses the skills of professionals from different disciplines to develop and evaluate intervention plans that significantly improve the performance of students.

What it is:

- A process designed to maximize student performance.
- A method focused on outcomes.
- A method to ensure accountability and intervention evaluation.
- It is all about student progress, regardless of where and who that student is.
- It can be applied to the student (academic, behavior), classroom (discipline, returning homework), building (bullying, attendance) and district levels (over-/under-representation).



Problem Identification

During the first step, Problem Identification, the problem is stated in objective, measurable terms as the difference between what is expected and what is observed. In this way, a problem can be defined by the following equation:

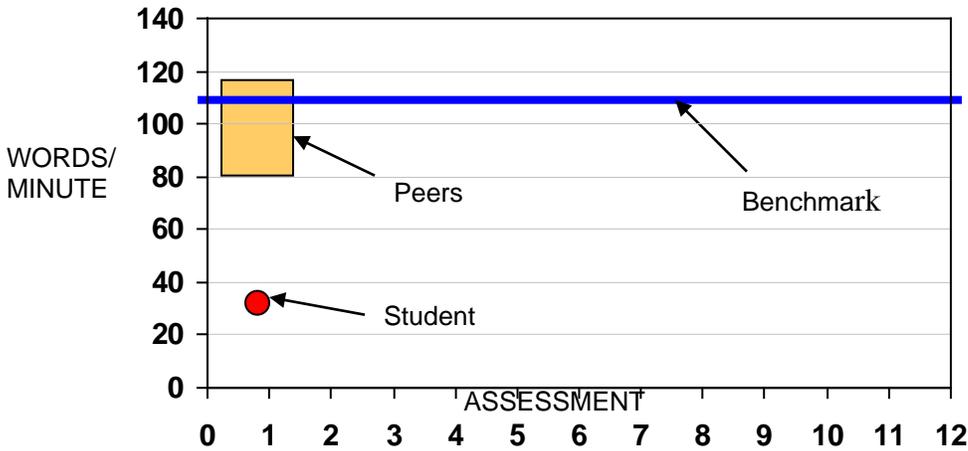
$$\text{Problem} = \text{Expectation} - \text{Observation} \text{ or } P = E - O$$

For instance, you may be working with a third grader whose oral reading fluency rate in the middle of the year is 41 words correct per minute (wcm). The expectation at that time is 67 wcm, thus the problem = expectation - observation or the problem is 26 wcm.

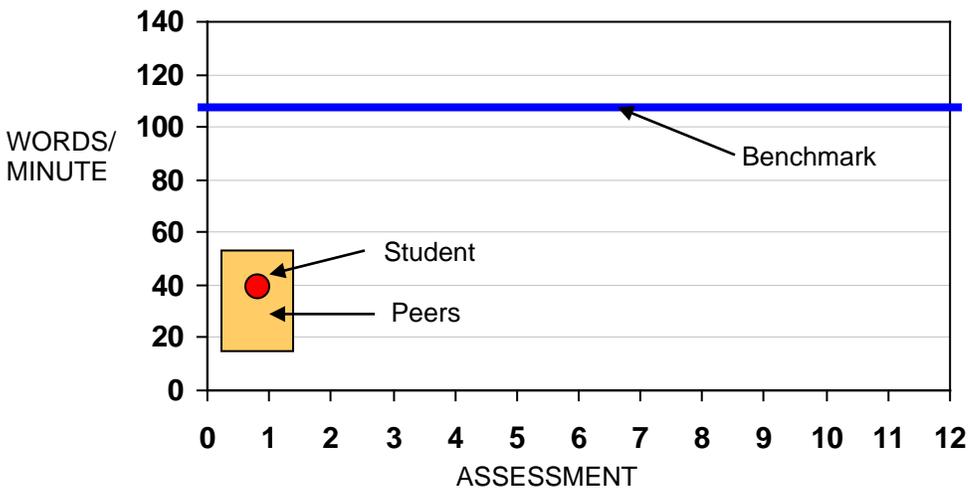
Expectations can be found in a variety of sources including local norms, normative standards, criterion standards, peer performance, instructional placement standards, developmental standards, teacher expectations, school/policy standards, or district criteria on district level assessments to name a few. The important thing to note is that a problem cannot be defined without a declared and accepted expectation.

Equally as important, it must be understood whether the identified problem exists for only one student, a small group of students, or a large group of students. Different interventions will be necessary to address these different situations. A large group problem cannot be solved one child at a time. When large group problems are noted, problem solving is conducted on a large scale and changes in overall curriculum and instruction are often appropriate interventions. Small group problems result in designing instruction that is matched to student need delivered in small group settings. If the problem is present only for one or a very few students, individual student problem solving occurs.

In the immediate example below, the individual student is performing well below his peers and benchmark. Interventions will be directed at the individual student.



However, the following example represents a large group problem. Changes should be made to the core curriculum/instruction as both the individual student and the peers are performing far below benchmark.



The definition of the problem must focus on teachable skills that are alterable and educationally meaningful that can be changed through the process of instruction.

Problem Analysis

Once a problem has been clearly defined by the problem solving team, the problem must be analyzed with the goal of answering the question, “Why is this problem occurring?” During this step, the relevant information known about the problem is considered, potential hypotheses about the possible causes of the problem are generated, and information is gathered to confirm or disconfirm the hypotheses. The gathering of this information is the assessment process in a problem solving model. When a hypothesis about an underlying cause is confirmed, the intervention is then linked to the proposed reason that the problem is occurring. The process of problem analysis leads us to the most likely reason(s) that the difference between expectation and observation exists and subsequently to an intervention with a high likelihood of success.

The domains assessed for information to analyze the problem are instruction, curriculum, environment, and learner. Some of the questions asked are – “Has the child received instruction in the target skill?”, “Does the curriculum contain the target skill?”, and “Does the environment support the acquisition and display of the skill?” The following table illustrates different areas where one can begin to explore possible causes for problems.

HYPOTHESIS DOMAINS	EXAMPLES
I Instruction	Frequency of interaction, Reinforcement, Presentation Style
C Curriculum	Difficulty, Presentation, Length, Format, Relevance
E Environment	Peers (expectations, reinforcement, values, support), Classroom (rules, distractions, seating, schedule, physical plant), Home/Family Support
L Learner	Skills, Motivation, Health

The methodologies used to assess the above domains are reviewing, interviewing, observing, and testing.

ASSESSMENT PROCEDURES	EXAMPLES
R Review	Review existing records.
I Interview	Interview the student, parents and/or teacher.
O Observe	Observe in the classroom or other appropriate setting.
T Test	Test the learner on a particular skill or concept.

Most often, this is not a linear process. Frequently, the consideration of known information, possible causes, and necessary unknown information happens quickly, nearly simultaneously. Thus, these steps do not always occur in the same order. Hypothesis generation involves the balancing of known information, possible causes, and gathering of unknown information in a repetitious process that continues until a hypothesis with a high likelihood of correctness is derived.

Remember, hypotheses should be specific, observable, measurable and should focus on alterable variables.

The following is an example hypothesis and corresponding prediction statement:

Brandon is unable to complete arithmetic seatwork on time because he has not acquired math facts at the automatic level. If we provide Brandon with strategies to increase fact fluency, then he will complete his work on time.

Intervention Design

Once a problem has been defined and analyzed, the goal is to take the information gathered through problem analysis and utilize it to develop an instructional plan that matches the identified student need. This is accomplished through intervention design. Identified missing skills are targeted for explicit instruction within a supported learning environment. An intervention should be purposeful, planned and grounded in data. It is about making decisions about alterable variables within instruction, curriculum and the environment. Problem Solving teams focus on those modifications in these areas that will directly impact, or alter the targeted behavior. Instructional strategies that are based on the nature of the defined problem and yield the most likelihood for success are selected.

In the above example concerning Brandon's lack of math fact fluency, possible interventions could include providing Brandon with strategies to increase fact fluency such as additional time for learning fact fluency and software programs to increase fact fluency.

Interventions should be evidence-based, delivered with integrity, scaled for intensity, implemented for sufficient time, evaluated frequently and integrated across tiers. A good intervention plan: explicitly defines the skills to be taught; focuses on measurable objectives; clearly defines who will complete various tasks, when and how; describes a plan for measuring and monitoring the effectiveness of instructional efforts; and reflects the resources available. A good intervention plan is very SPECIFIC and identifies: (1) WHO is responsible?, (2) WHAT will be done?, (3) WHEN will it occur?, (4) WHERE will it occur? and (5) HOW will it be progress monitored?

Response to Intervention

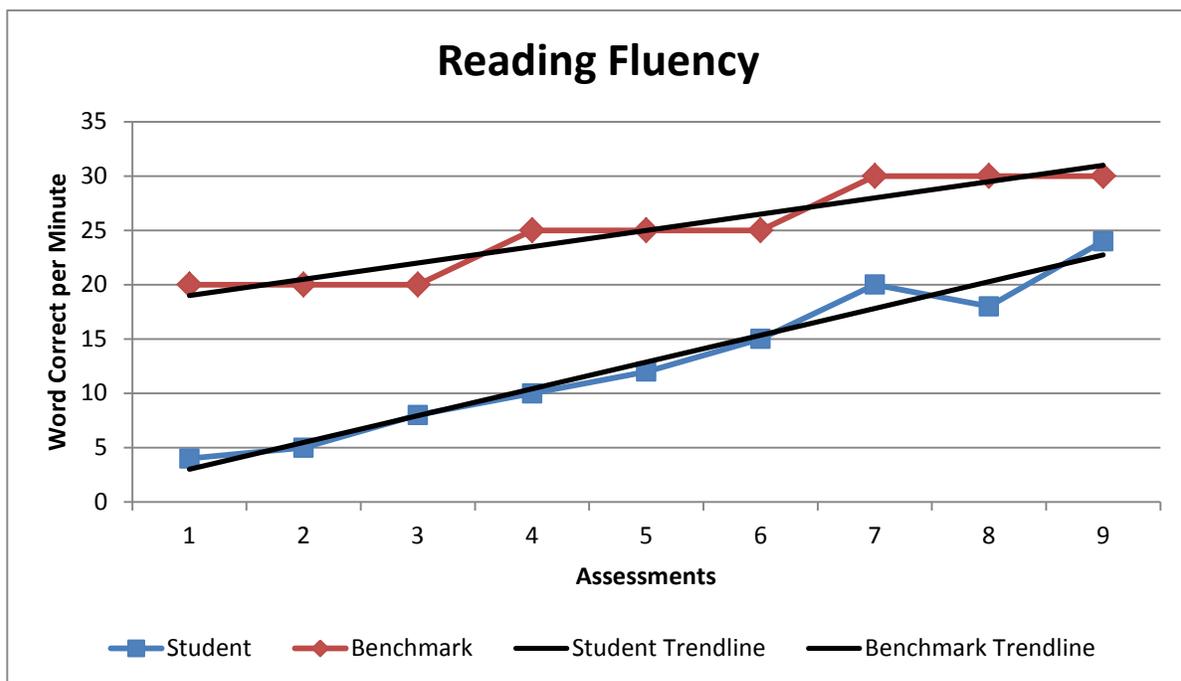
Progress monitoring is a methodology for measuring the effectiveness of an intervention. In order to design an intervention, the problem must have been analyzed adequately. In order for problem analysis to have occurred, the problem must have been accurately defined. So, intervention progress monitoring should not occur unless the first three steps of problem solving have been conducted.

In order to answer the question “Is it working?”, information on student performance over time must be gathered. Since we need to make decisions quickly if our interventions are not delivering the desired results, it’s necessary that we gather this information frequently. Thus, key features of the instrumentation used to collect these data are that they can be administered frequently and are sensitive to small changes in behavior.

Also important, this information must be plotted on a graph so that trends in student performance can be visualized, per Florida Rule 6A-6.0331. That is, we must be able to see where we’re headed in order to evaluate the effectiveness of instructional efforts. Data are used to make important decisions about whether to continue the intervention, modify it, or change it completely.

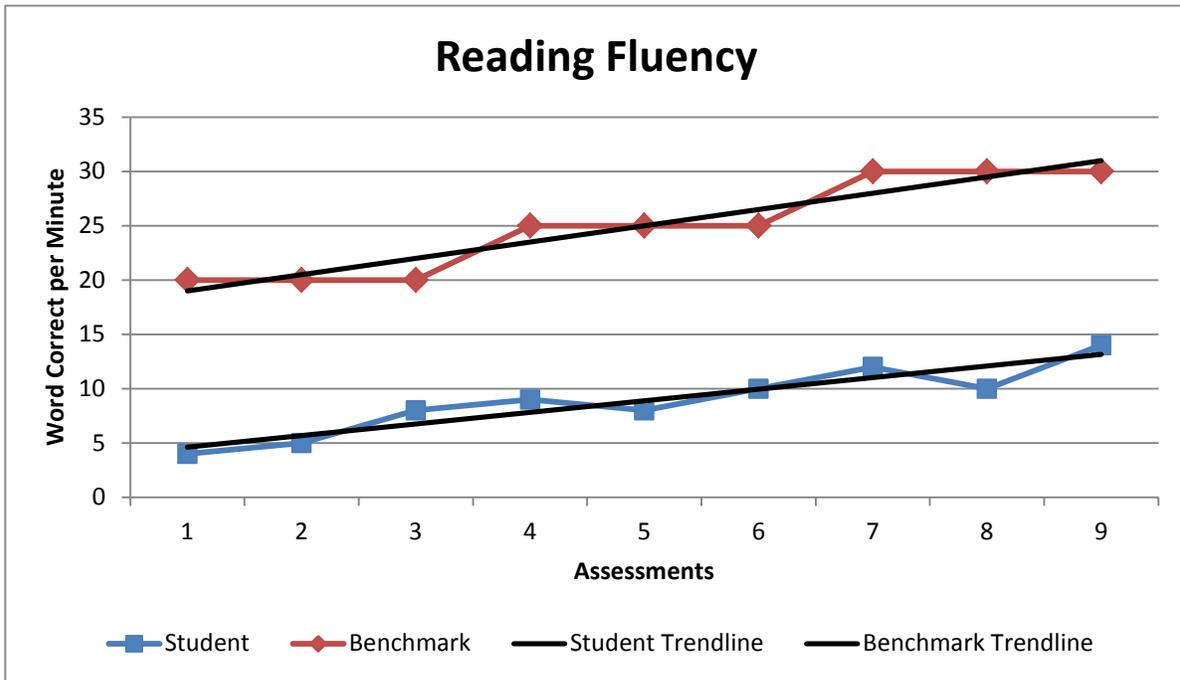
A “good” or positive response:

- Gap is closing.
- Can extrapolate a point at which the target student will “come in range” of the target.
- Level of “risk” lowers over time.



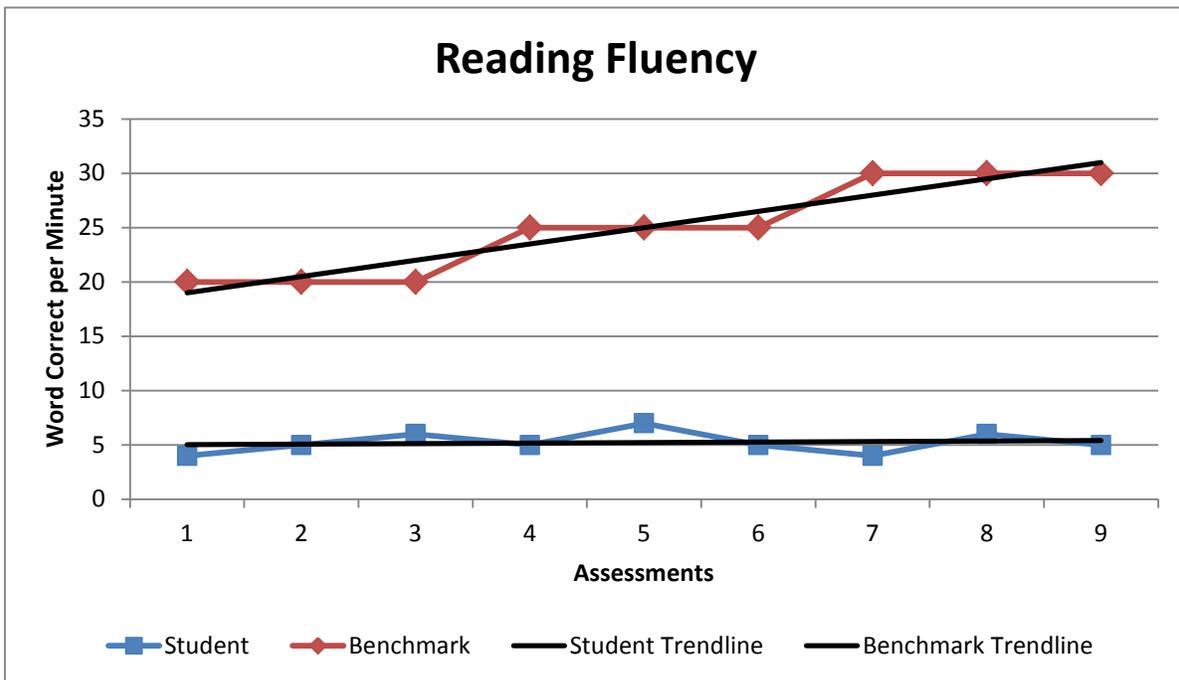
A “questionable” response:

- Rate at which gap is widening slows considerably, but gap is still widening.
- Gap stops widening, but closure does not occur.
- Level of “risk” remains the same over time.



A “poor” response:

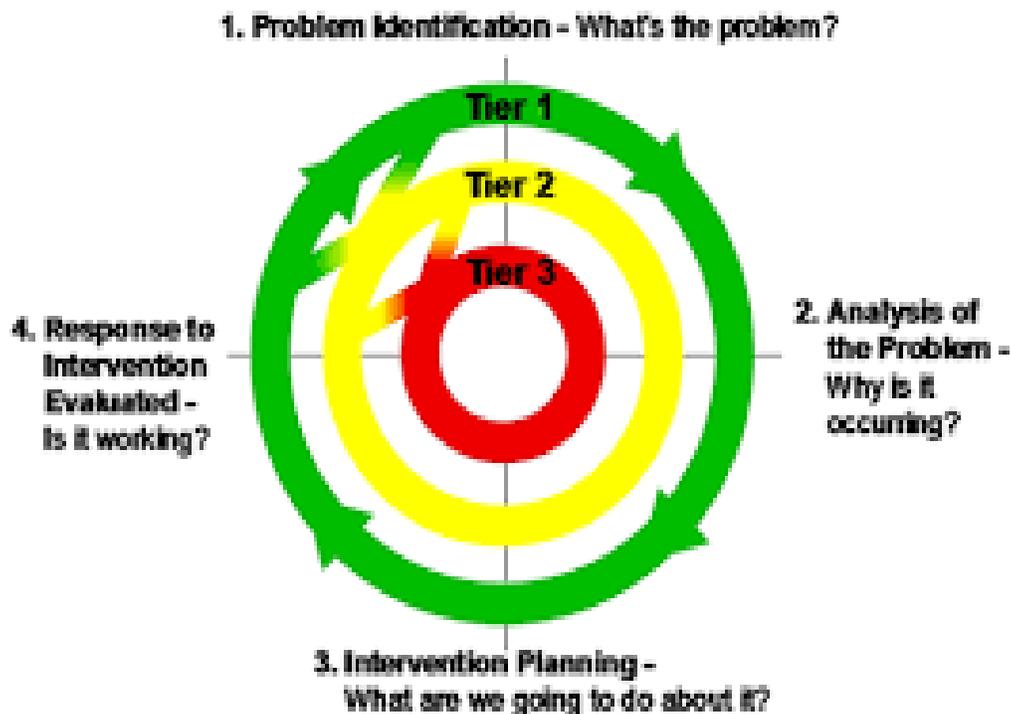
- Gap continues to widen with no change in rate.



If an intervention is not producing the desired results, a first step is to evaluate whether the intervention plan is being implemented as designed. If not, make adjustments to ensure that it is. If the treatment integrity has been verified, all the previous problem solving steps should be reviewed. A mistake may have been made in problem identification, problem analysis, or intervention design.

If an intervention is not producing the desired results, it does not necessarily mean that it is the wrong intervention. It may be the right intervention, but the intensity needs to be increased. Three basic ways to increase the intensity of an intervention are: 1) reduce the size of the group; 2) increase the amount of time that the intervention is delivered; and 3) narrow the focus of the lesson. These strategies for intensification may be used individually or in combination.

It is important to note that the problem solving process is applied to all tiers of the response to intervention model as shown below.



Response to Intervention (RtI) Model

What is RtI? RtI is the practice of (1) providing tiers of increasingly intensive, high-quality instruction/intervention matched to student needs and (2) measuring and continually monitoring students' progress over time and (3) using the resulting data to make important educational decisions to guide instruction.

Important aspects of RtI include:

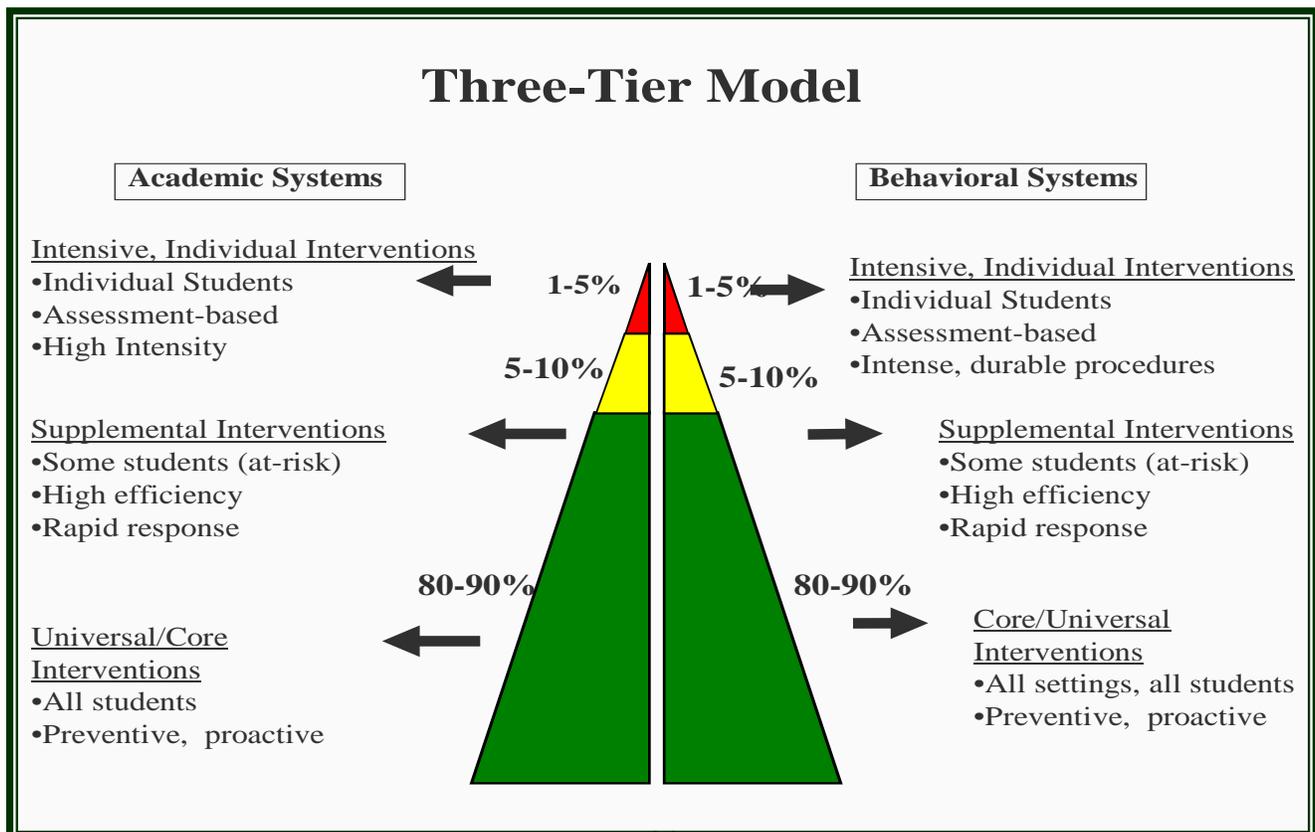
- Comprised of a multi-tiered system.
- Provides early intervention.
- Uses research-based, scientifically-validated instruction/interventions.
- Teaches all children.
- Uses a problem solving approach.
- Provides instruction/intervention.
- Incorporates increasing levels of intensity.
- Encourages data-based decisions.
- Incorporates progress monitoring.
- Matches interventions to needs.
- Whole school works together.
- Prevents academic and behavioral problems.

RtI is:

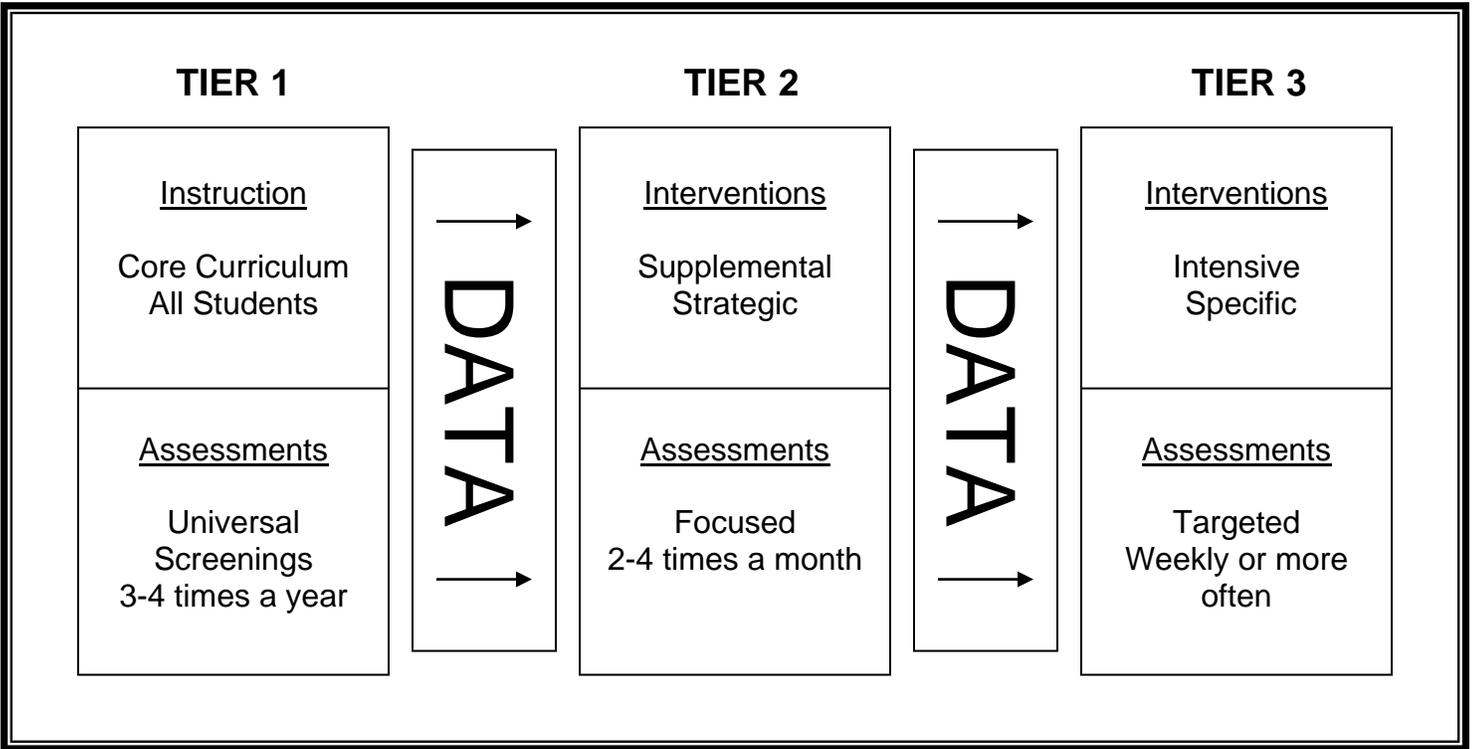
- An overall integrated system of service delivery.
- Effective for students who are at-risk for school failure as well as students in other disability categories.
- An excellent opportunity to more effectively align with IDEA and NCLB principles and practices.

RtI is NOT:

- Just an eligibility system – a way of reducing the numbers of students placed into special education.
- Limited to students with learning disabilities.
- Just a special education approach.
- A packaged program.
- A place in the building.



It should ALWAYS be DATA DRIVEN!!



The following is an example of how the 3-tier system might look for reading instruction.

	TIER 1	TIER 2	TIER 3
Time	90 minutes	120 minutes	180 minutes
Curricular Focus	All 5 areas: phonemic awareness, phonics, fluency, comprehension, vocabulary	Less than 5	2 or less
Curricular Breadth	Core	Core + Supplemental	Core + Supplemental + Intensive
Frequency of Progress Monitoring	3 or 4 times a year	Bi-monthly or more frequently	Weekly to daily

Interventions and Assessments

What is an intervention?

An intervention is a specific academic/behavioral strategy designed to provide at-risk students with the necessary skills and academic/behavioral supports so they may achieve grade-level expectations.

A valid intervention generally includes the following components:

1. A statement of the problem which has been identified through the problem-solving process.
2. Baseline data – the level of skill in the identified problem area that the student has prior to intervention.
3. A research-based intervention targeted to the student's identified problem.
4. An intervention plan having the following elements:
 - A goal statement that indicates the specific targeted outcome for student improvement.
 - A detailed summary of the steps involved in the intervention and the resources required to implement the plan.
 - The date the plan is initiated and the length of time the intervention is implemented.
 - A statement indicating how student progress will be regularly monitored and data will be collected (graphic depiction is preferable).
 - The name(s) and position(s) of the person(s) initiating the intervention and collecting the progress monitoring data for decision-making.
5. Regular examination of the progress monitoring data in order to ensure that the student is progressing at an acceptable rate.

An intervention is NOT:

- Simply completing a form; it is what you do with the child.
- An assessment, such as a functional behavior assessment, classroom observation or psychoeducational evaluation.
- A change of seating or preferential seating.
- Parent contact.
- Small group or any other instruction, including going over the same material again, if not specific to the student's identified problem and does not include frequent and ongoing progress monitoring.
- Homework or peer buddies.
- Retention.
- In or out of school suspension.
- Extended time or shortened assignment without supplemental exposure to identified needs.

What are assessments?

Assessments are given to determine current functioning, but may be administered for different reasons during the RtI process. Different types of assessments include those for screening, diagnostic information and progress monitoring.

- **Screening assessments** are typically administered during the Tier 1 phase. These assessments are given three to four times a year to all students and are usually performed through brief assessments such as curriculum-based measures that include FAIR. These measures can provide an early indication of which students are entering the year at-risk. It may also be used to identify students who have exceeded expectations and would benefit from greater challenges.
- **Diagnostic assessments** are administered to individual students and are incorporated to aid in the determination of specific skill deficits. They are important in choosing interventions needed to aid with academic or behavior needs.
- **Progress monitoring** is a scientifically based practice of assessing students' performance on a regular basis. It serves three purposes: (1) to determine whether the student is profiting from the program, (2) to build more effective programs for those who are not benefiting and (3) to estimate the rate of improvement. Progress monitoring measures should be sensitive to small increments of growth over time and administered efficiently over short periods. They should be administered repeatedly (using multiple forms) and result in data that can be summarized in teacher-friendly data displays or graphs.

TIER 1

Tier 1 interventions consist of the core curriculum and school-wide programs. It is presented to the whole class and/or school and includes high quality, evidence-based instruction delivered by a qualified teacher. Consequently, tier 1 is sometimes considered instruction rather than intervention as it is received by all students. Tier 1 instruction/intervention takes place in the general education classroom by the general education teacher. It should be effective for approximately 80% - 90% of the student population. If it is not, school and/or class modifications should be addressed. Tier 1 interventions can include the principles of differentiated instruction and universal design. Differentiated instruction is an instructional concept that maximizes learning for all students because students vary in their academic abilities, learning styles, personalities, interests, background knowledge and experiences, and levels of motivation for learning. A teacher using differentiated instruction uses the best teaching practices and strategies to create different pathways that respond to the needs of various learners. The concept behind universal design is that even though something may be intended for a particular target, it has universal applications. Providing pictures for a student who is deaf may benefit other students as well.

INTERVENTION EXAMPLES

- Core instruction.
- Small, flexible reading groups – use data to form groups based on deficit skills.
- Targeted and deliberate independent reading practice that utilizes relevant practice, extension and production opportunities.
- Differentiated instruction.
- School-wide discipline.
- Classroom rules.
- Accommodations.

ASSESSMENT EXAMPLES:

- FAIR.
- Core reading program unit tests.
- FCAT.
- Stanford Achievement.
- Discipline data.
- School climate surveys.
- Kindergarten Readiness Inventory.

TIER 2

Tier 2 interventions are supplemental and strategic. They are administered to students who do not progress at the Tier 1 level and should include no more than approximately 10% - 20% of the student body. Tier 2 interventions supplement the core curriculum. They do NOT replace the core curriculum. The core curriculum is continued and additional interventions are implemented that address specific deficits. These interventions generally involve small group instruction and significantly more time practicing the skill, such as an extra 30 minutes a day learning the targeted skills. Progress monitoring occurs more frequently than in Tier 1 interventions. Twice a month is frequently suggested. The interventions may be administered in the general education classroom by the general education teacher or in another appropriate setting by a qualified person.

INTERVENTION EXAMPLES

- Targeted small group interventions with focus on a particular skill.
- Small group training for social skills, problem-solving, conflict resolution, anger management, violence prevention and bullying.
- Computer program to build skill deficits.
- Supplemental material to core curriculum.

ASSESSMENT EXAMPLES

- FAIR Broad Diagnostic Inventory.
- FAIR Targeted Diagnostic Inventory.
- Ongoing progress monitoring.
- Behavioral observations.
- Diagnostic Assessment of Reading.
- Curriculum based assessments.

TIER 3

Tier 3 interventions are much more intensive and individualized. They are targeted to specific individual student needs and generally serve fewer than 5% of the student population. Tier 3 interventions are usually delivered to individuals or very small groups. Targeted/diagnostic assessments may be given to identify specific skill deficits. Additional time is given for instruction and practice of these deficits. Progress monitoring occurs weekly at a minimum. The interventions typically take place outside the general education classroom with additional personnel such as another classroom teacher, reading teacher or other appropriate person.

INTERVENTION EXAMPLES

- Functional Behavior Assessment
- Positive Behavior Intervention Plan
- Individual instruction.
- Additional programs.
- Computer program to build skill deficits.
- Supplemental material to core curriculum.
- One-on-one or very small group instruction.

ASSESSMENT EXAMPLES

- FAIR Targeted Diagnostic Inventory.
- Ongoing progress monitoring.
- Diagnostic Assessment of Reading.
- Curriculum based assessments.

THE 3 TIERS MAY BE SUMMARIZED AS BELOW:

	TIER 1: Core Class Instruction	TIER 2: Supplemental Instruction	TIER 3: Intensive Interventions
Focus	All students.	Students identified as at-risk and who have not responded to Tier 1 efforts.	Students with significant difficulties who have not responded to Tier 2 efforts.
Instruction/Program	Core program that is evidence-based providing differentiated, comprehensive instruction on students' instructional level.	Evidence-based, comprehensive instruction on students' instructional level that targets assessed needs.	Sustained, intensive, scientifically-based instruction targeting diagnosed needs.
Grouping	Flexible grouping to differentiate instruction and meet student needs.	Homogeneous small groups, recommended no more than 1:5 ratios.	Homogeneous small groups, recommended no more than 1:3 ratio.
Time	90 minutes per day.	20-30 minutes per day in small group in addition to time in core program.	45-60 minutes per day in addition to time in core program.
Assessment	Universal screening/benchmark assessment approximately three times a year.	Progress monitoring at least twice a month.	Progress monitoring at least weekly.
Interventionist	General education teacher.	General education teacher or appropriate personnel.	General education teacher or personnel trained to provide instruction/intervention.
Setting	General education classroom.	Appropriate setting – may be within or outside of general education classroom.	Appropriate setting as determined by school.

ASSESSMENT/INTERVENTION LIBRARY

As part of the standard protocol method for Response to Intervention, schools should build an assessment/intervention library using the form on the following page. Assessments and interventions will vary depending on targeted deficit, school resources and grade level. School grade level teams, curriculum coordinators and reading coaches should build the assessment/intervention library by determining the specific screening assessments, diagnostic assessments, progress monitoring assessments and academic/behavioral interventions available at their individual school. The district/school reading plan serves as one resource for reading interventions and assessments.

Assessment/Intervention Library

School: _____

Grade Level: _____

Deficit: _____

Screeners/Diagnostic Assessments:

Interventions:

Progress Monitoring Assessments:

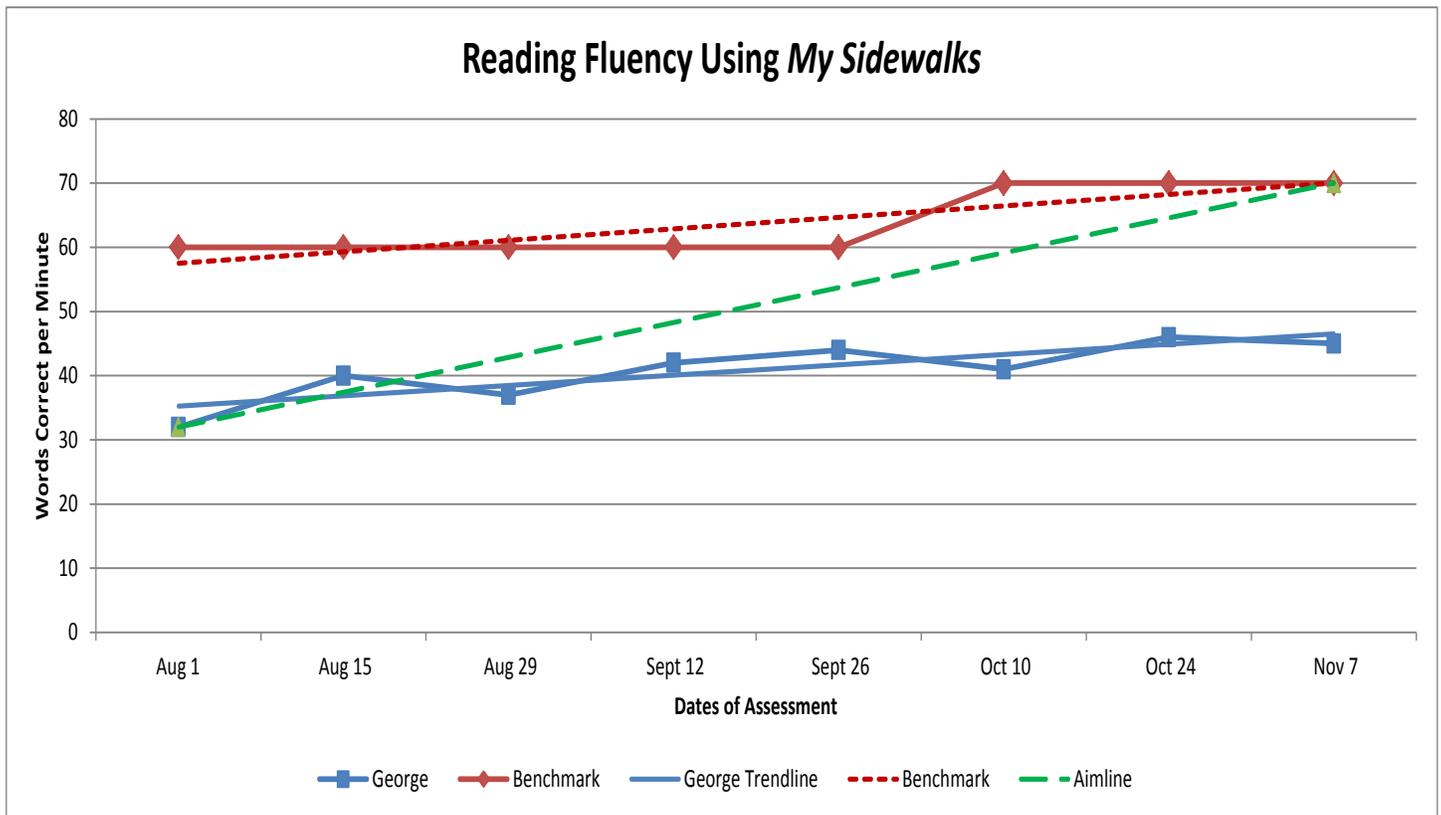
GRAPHS

Graphs are required to illustrate progress monitoring. Florida Administrative Code Rule 6A-6.0331 (General Education Intervention Procedures, Identification, Evaluation, Reevaluation and the Initial Provision of Exceptional Education Services) states “Pre-intervention and ongoing progress monitoring measures of academic and/or behavioral areas of concern must be collected and communicated to the parents in an understandable format.”

Florida Administrative Code Rule 6A-6.03018 (Exceptional Education Eligibility for Students with Specific Learning Disabilities) states that data-based documentation must be provided to parents “of repeated measures of achievement at reasonable intervals, graphically reflecting the student’s response to intervention during instruction.”

Graphic representations are an effective means of presenting data to parents and others. A specific method of graphing is not dictated, but the method should be “functional” for all users. Graphs should include individual student response data, aim lines and trend lines. The graphs should allow for group comparisons. Graphic representations of the student’s level of performance and rate of progress are to be made available to parents each time the team uses the data to make decisions.

The following is an example of reading fluency progress using the *My Sidewalks* program as an intervention for fourteen weeks. The graph illustrates the student’s progress, expected benchmarks and projected aim line. This graph was prepared using the Excel program. Graphs may be produced by hand or using additional programs such as ChartDog.



Rtl Team/Responsibilities

The School Response to Intervention team consists of both core members and temporary members. Core members should remain as consistent members of the team and participate in all Rtl meetings. Temporary members attend Rtl meetings on an as-needed basis depending upon the specific child involved.

Core Members include:

- Principal or Assistant Principal
 - Facilitate implementation of Rtl in the school.
 - Provide and/or coordinate continuous professional development.
 - Attend Rtl meetings to be active in the Rtl change process.
 - Monitor fidelity of interventions in school.
 - Assign paraprofessionals to support implementation of Rtl in the classrooms to the extent possible.
 - Provide for class coverage as needed during Rtl meetings.
- School Counselor
 - Serve as chairperson for the Rtl team.
 - Oversee scheduling of Rtl meetings.
 - Store Rtl folders and data as the process progresses.
 - Maintain documentation log of students involved in Rtl process.
 - Obtain parent permission for screenings.
 - Contact parents with dates/times of Rtl meetings.
 - Conduct social/developmental history interviews.
 - Aid with development of intervention plan.
 - Assist with Rtl training.
- General Education Teacher
 - Aid with development of intervention plan.
 - Provide support to classroom teacher.
- ESE Teacher
 - Aid with development of intervention plan.
 - Provide support to classroom teacher.

Rotating members include:

- Classroom Teacher
 - Administer core curriculum with adjustments for students not making sufficient progress.
 - Analyze data from screeners (FAIR, FCAT, SAT-10, etc.)
 - Complete Tier 1 Screeners/Observations and Student Record Review for students referred to Rtl team.
 - Collect baseline data during Tier 1.
 - Contact parents during Tier 1.
 - Notify guidance counselor of need for screenings on referred students.
 - Complete Intervention Referral and Request for Rtl meeting.
 - Complete Initial Functional Behavior Assessment as needed.
 - Collect progress monitoring data.
 - Aid with development of intervention plan.
- Curriculum Specialist
 - Provide knowledge of classes/programs at school site.
 - Assist with scheduling.
 - Help identify strategies, materials and resources for interventions.
 - Aid with development of intervention plan.
- Reading Coach
 - Assist with development of reading interventions and intervention plan.
 - Help identify strategies, materials and resources for interventions.
 - Provide assistance with reading assessments.
 - Provide Rtl training.
- Speech/Language Pathologist
 - Administer screenings as needed.
 - Assist with the development of interventions from their area of expertise.
- School Psychologist
 - Contribute knowledge of Rtl process, evaluation of outcomes, data collection and data analysis.
 - Help identify strategies, materials and resources for interventions.
 - Aid with the review of progress monitoring data.

- Incorporate Rtl data when guiding a possible ESE referral.
- Assist with Rtl training.
- School Nurse/Social Worker/ELL specialist
 - Serve as resource person when needed for specifically related referrals.
- Parent
 - Provide valuable input with regard to child.
 - Support Rtl interventions.

The following **roles/duties** are recommended for an Rtl team. Each school team may select members to serve in each role capacity.

- Chairperson
 - Coordinates completion of Rtl documentation.
 - Houses Rtl documentation as completed.
 - Notifies Rtl team members of dates, times and locations of meetings.
 - Outlines meeting agendas.
 - Coordinates class coverage when needed.
 - Coordinates completion of ESE paperwork IF required.
- Facilitator
 - Establishes and maintains a supportive atmosphere.
 - Keeps the meeting goal-oriented by following agenda.
 - Pays special attention to group problem-solving process.
 - Attempts to elicit appropriate level of agreement during the process.
 - Helps resolve conflicts in the group.
- Recorder
 - Keeps accurate and concise record of Rtl meetings by completing the Response to Intervention Plan Progress Report.
 - Seeks clarification of key information.
 - Assures all relevant information is obtained and recorded.
- Time Keeper
 - Monitors how far the team has progressed following the guidelines of the Rtl meeting format.
 - Prompts team to remain focused on the issue at hand.
 - Helps team reach closure when time is diminishing.

Rtl Meeting Format

Initial Meeting Agenda

- 1 – Introductions (~2 minutes)
 - a. Team members introduce themselves.
 - b. Facilitator reviews meeting agenda.
- 2 – Review student strengths and talents (~3 minutes)
 - a. Team discusses student's strengths, talents and positive qualities.
 - b. Team identifies rewards or incentives that motivate the student.
- 3 – Assess referral concern(s) (~3-5 minutes)
 - a. Chairperson, facilitator, referring teacher or parent (if referral source) summarizes referral concerns.
 - b. Other team members share additional concerns.
 - c. Team members review relevant background information taken in part from the Tier 1 Student Record Review.
- 4 – Review baseline and intervention data (~3-5 minutes)
 - a. Classroom teacher presents baseline data collected prior to meeting.
 - b. Classroom teacher summarizes accommodations/interventions implemented during Tier 1 prior to meeting.
- 5 – Determine deficits and set goals (~5 minutes)
 - a. Team determines specific skill deficits.
 - b. Team members devise realistic, observable and measurable goals for improvement.
- 6 – Design an intervention plan (~5-10 minutes)
 - a. Team members develop at least one intervention that addresses skill deficit.
 - b. Team members determine who, where and how frequently the intervention will be implemented.
 - c. Team members determine appropriate method and schedule of progress monitoring.
- 7 – Review intervention plan (~2 minutes)
 - a. Recorder reviews main points of intervention plan.
 - b. Facilitator elicits any final concerns or questions regarding the plan.
 - c. Chairperson schedules follow-up meeting with team members.

Follow-up Meeting Agenda

- 1 – Introductions (~2 minutes)
 - a. Team members re-introduce themselves.
 - b. Facilitator reviews meeting agenda.
- 2 – Review referral concerns (~3 minutes)
 - a. Recorder briefly reviews initial meeting documentation.
 - b. Facilitator elicits any updated information since the initial meeting occurred.
- 3 – Description of implementation of intervention plan (~5-10 minutes)
 - a. Classroom teacher discusses implementation issues and progress monitoring data.
 - b. Team members ask any questions necessary to clarify information.
- 4 – Evaluation of plan effectiveness (~5 minutes)
 - a. Team members evaluate student progress by analyzing data obtained from progress monitoring.
 - b. Team members determine if student met goals.
- 5 – Decision point (~10 minutes)
 - a. Team members make decision whether to discontinue interventions, modify/continue interventions or make ESE referral.
 - b. If interventions are modified or continued, a new intervention plan is drafted, reviewed and implemented.
 - c. If ESE referral is recommended, parents sign consent.

Professional Development

The district shall appoint a district level Response to Intervention team. Team members may include representation from curriculum, Title 1, and special education. Additional team members may include representatives of school and county level support such as school psychologist, speech/language pathologists and guidance counselors. The district team shall attend district meetings on Rtl training as provided.

Professional development in the area of Rtl shall be provided during pre-school to address general information. Specific training will be provided at each school by various persons trained as part of the Training of Trainers workshop. Individual schools will determine the method and scheduling of training.

On-going professional development will be provided through the district office.

The Florida Rtl Introductory Training Online Course is a comprehensive online introduction to Rtl. Incentives, such as a stipend and professional development hours, will be provided.

The Beliefs Survey assesses beliefs of educators important for establishing consensus regarding implementation of a PS/Rtl model. The Perception of Practices Survey assesses educators' perceptions regarding the degree to which practices associated with a PS/Rtl model are being implemented. The Perceptions of Rtl Skills Survey assesses educators' perceptions regarding their ability to incorporate needed skills. Results of these surveys will help guide on-going professional development.

Parent Involvement

Both NCLB and IDEA require parental involvement. Florida Rule 6A-6.0331 states:

“Opportunities for parents to be involved in the process to address the student’s areas of concern must be made available. In addition, there must be discussion with the parent of the student’s responses to interventions, supporting data and potential adjustments to the interventions and of anticipated future action to address the student’s learning and/or behavioral areas of concern. Documentation of parental involvement and communication must be maintained.”

Parental/family involvement is critical to student progress and should be facilitated throughout the Rtl process regardless of whether the parent or teacher initiated the concern. Parents can provide critical perspectives that may increase the efficacy of Rtl interventions. Communication with the parent should take place at regular intervals or when instructional decisions are made based upon progress monitoring. Parents should always be invited to attend meetings. The Rtl process does not supersede a parent’s request for a comprehensive individual evaluation, but parents are encouraged to work with the school to implement interventions prior to referral.

The following table describes parent involvement throughout the Rtl process in Holmes County.

TIERS	How parents should be involved.
	At start of school year, a pamphlet is sent home describing the Rtl process.
Tier 1	The general education teacher verbally contacts parents concerning assessment history and baseline data of classroom performance during the first nine-weeks of school.
Tier 2	Parents provide consent for screening. Parents are formally invited to attend the initial meeting of Tier 2 interventions. At the meeting, parents are encouraged to supply information about their child to aid in the determination of appropriate interventions.
Tiers 2/3	Parents are formally invited to attend the follow-up meeting of Tier 2 interventions. Progress monitoring data is presented and efficacy of Tier 2 interventions is determined. This meeting may become the initial meeting for Tier 3 interventions if the decision is made to provide more intensive interventions.
Tier 3	Parents are formally invited to attend the follow-up meeting of Tier 3 interventions. All previous documentation/interventions are reviewed. A decision is made to discontinue/continue/modify interventions or refer for ESE evaluation. If ESE referral is recommended, parents sign consent and provide information for social/developmental history.

Funding

Potential funding sources for the implementation of Response to Intervention include the following:

- Title I, Title II and Title III – Professional development, interventions, resources and materials can be paid from various title funds.
- Individuals with Disabilities Education Act – IDEA, Part B funds may be used for professional development. Additionally, up to 15% of special education funds may be applied to develop and implement interventions for general education students who need additional academic and/or behavioral support.
- Annual School Improvement Allocations to School Advisory Councils – If Rtl is included in a goal, objective or strategy of the School Improvement Plan, these funds may be used to fund the school's Response to Intervention.

Rtl Glossary

Adequate Yearly Progress (AYP) - A measurement defined by the federal No Child Left Behind Act that allows the U.S. Department of Education to determine how every public school and school district in the country is performing academically according to results on standardized tests.

Baseline – Data collected prior to the initiation of an intervention that is utilized for comparison with data collected during and/or after an intervention has been implemented.

Behavior Intervention Plan (BIP) – A behavior intervention plan is based on a Functional Behavior Assessment (FBA). It is developed from input of the teacher, parent and/or child and frequently includes student observations. The plan includes positive behavior supports (PBS), identified skills for school success, and specific strategies for behavioral instruction.

Benchmark - A standard that has been correlated to successful outcomes (e.g., 40 words read correctly per minute at the end of first grade is a performance that is correlated with later reading success; hence, it is often used as a benchmark to identify struggling readers).

Core Curriculum – Curriculum delivered to all students. It should be effective for approximately 80% of all students.

Curriculum Based Assessment (CBA) - Measurement that uses direct observation and recording of a student's performance in the local curriculum as a basis for gathering information to make instructional decisions

Curriculum-Based Measurement (CBM) - Refers to the process of brief, timed measurement of child performance using materials that either come from, or are similar to, materials used during the child's regular instruction. CBM is used to assess a student's level of performance as well as his/her progress toward a specific goal. CBM is standardized, may be criterion- and norm-referenced and is frequently used within most Response to Intervention (RtI) models to provide the data upon which decisions are made concerning the need for intervention, referral for evaluation and eligibility.

Data Point – A score on a progress monitoring assessment. Multiple data points are needed to determine whether or not a student is responding positively to an intervention.

Data-Driven Decision Making – The process of planning for student success (both academic and behavioral) through the use of ongoing progress monitoring and analysis of data

Diagnostic Assessment – Assessments that help teachers plan instruction by providing specific or in-depth information about targeted skills or instructional needs of students.

Direct Instruction - An instructional method grounded in applied behavior analysis. Direct instruction divides skills into component skills and focuses on building fluency on each component skill in a hierarchical manner until the target skill is established. This method includes rapid pacing, individual and group response opportunities, frequent and immediate corrective feedback and contingencies to maintain motivation to respond.

Discrepancy Statement – A clear and measurable statement of student performance as compared to same-age peer performance.

Behavior example: When observed in circle time, Billy is on-task 30% of the time compared to classmates who are on-task 88% of the time.

Academic example: Susan, a third grader, is reading 65 correct words per minute (cwpm). Her peers are currently reading 95 correct words per minute (cwpm).

Duration – How long a behavior or an intervention occurs. "Sufficient duration" is dependent on the program or strategy being used, the age of the student, and the type and severity of the problem. Many research-based programs provide guidelines or recommendations for duration.

Early Intervention – Decisions are made in the early grades for the provision of targeted interventions that are carefully structured and designed.

Fidelity – Fidelity refers to the accuracy, and attentiveness with which an intended research design for instruction and/or intervention is implemented. This means that the intervention is implemented as the research base indicates. To support

standardization, the person providing the intervention must generally follow a prescribed protocol in order to ensure a program or strategy's fidelity.

Frequency – How often a behavior or an intervention occurs.

Functional Behavior Assessment (FBA) – This assessment is the process of determining the cause (or “function”) of behavior before developing a Behavior Intervention Plan. The intervention or BIP is based on the hypothesized cause (function) of behavior. The FBA is generally administered in Tier II by the assigned person at the school when behavior is being examined.

Gap Analysis - Gap Analysis allows us to measure the difference between the student's current level of performance and benchmark expectations.

Individuals with Disabilities Education Act (IDEA) - Is a United States federal law that governs how states and public agencies provide early intervention, special education, and related services to children with disabilities. It addresses the educational needs of children with disabilities from birth to age 21 in cases that involve 13 specified categories of disability.

Intensity – The adjustment of duration, length, and teacher-to-student ratio for a child's academic or behavioral needs.

Intensive Intervention - Interventions are considered more intensive if they require more adult supervision, an increased amount of modifications to the curriculum and/or many resources to conduct.

Intervention – The systematic and explicit instruction provided to accelerate growth in an area of identified need. They are designed to improve performance relative to a specific, measurable goal. Interventions are based on valid information about current performance, realistic implementation, and include ongoing student progress monitoring.

IQ-Achievement Discrepancy - Historically, the means by which a student is diagnosed with a learning disability. If the student's academic achievement scores are significantly below average for his/her age group and significantly below expected achievement based upon his/her estimated intelligence.

Office of Special Education Programs (OSEP) – Is dedicated to improving results for infants, toddlers, children and youth with disabilities ages birth through 21 by providing leadership and financial support to assist states and local districts.

Performance Deficit - A performance problem defined as performance lower than that expected based on the student's capability (sometimes referred to as a motivational deficit or a “won't do” problem). This type of learning problem requires a motivation-building intervention.

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

Progress Monitoring - The process used to monitor implementation of specific interventions.

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

Skill Deficit - Poor performance that is caused by lack of skill (as opposed to lack of motivation, sometimes called a “can't do” problem). Skill deficits require skill-building interventions.

Scientific, Research-Based Instruction - Refers to specific curricula and educational interventions that have been proven to be effective—that is, the research has been reported in scientific, peer-reviewed journals.

Specific, Measurable Outcome –The statement describing the single, specific, desired result of an intervention. To be measurable, the outcome should be expressed in observable and quantifiable terms.
Example: John will demonstrate mastery of grade-level basic math calculation skills as evidenced by a score of 85% or better on the end of unit test on numerical operations.

Standard Protocol Intervention - Use of the same empirically validated intervention for all students with similar academic or behavioral needs.

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

Tier I (Universal) Intervention/Instruction – Instruction provided to all students in the classroom.

Tier Two Strategic Interventions - Tier II interventions are to be implemented when assessment indicates that a student is not making adequate gains from universal instruction alone. They are generally smaller group interventions designed to meet the specific needs of a student and his/her peers with similar needs. These interventions **MUST** be research based. It typically includes less than 20% of all students. Tier two interventions do **NOT** replace core instruction, but support it by focusing upon specific deficits. Attendance/delivery of intervention is documented.

Tier Three Intensive Interventions - Tier III Interventions are those which offer a student highly individualized, systematic and explicit instruction in an area of assessed need and generally involve less than 5% of all students. Interventions are specifically matched to student needs through a task analysis of the learning or behavioral problem and should be conducted by a highly qualified teacher or trained professional in a small group.

Universal Screening – A step taken by school personnel approximately three times a year to determine which students are “at risk” for not meeting grade level standards or those who have behavioral or emotional problems that may interfere with their learning. Universal screening can be accomplished by reviewing recent results of state tests, or by administering an academic or behavioral screening test to all students in a given grade level. Those students whose test scores or screening results fall below a certain cut-off are identified as needing more specialized academic or behavioral interventions.

Procedures/Forms

The flow chart on the following page provides a step-by-step procedure for implementing the MTSS process to individual students. Schools and classroom teachers should keep in mind that the school or classroom should demonstrate approximately 80% success prior to applying Tiers 2 and 3 of the RtI process to individual students. If 80% of the school or classroom is not performing at the appropriate level, then whole-school or classrooms may need to be addressed.

The following forms are to be used as part of the MTSS process:

- MTSS 1 – Student History
- MTSS 2 – Observations
- MTSS 3 – Problem Solving Worksheet
- MTSS 4 – Tier 1 Comparison
- MTSS 5 – Request for Intervention Team Meeting
- MTSS 6 – Intervention Meeting Parent Invitation
- MTSS 7 – Hearing/Vision Screenings
- MTSS 8 – Parent Notification of Intervention Activities
- MTSS 9 – Social/Developmental History
- MTSS 10 – Tier II Supplemental/Strategic Interventions Plan
- MTSS 11 – Tier II Small Group Intervention Documentation/Progress Monitoring
- MTSS 12 – Intervention Documentation/Progress Monitoring Scores
- MTSS 13 – Tier III Targeted/Intensive Interventions Plan
- MTSS 14 – Tier III Intensive Intervention Documentation/Progress Monitoring
- MTSS 12 – Intervention Documentation/Progress Monitoring Scores
- MTSS 15 – Initial Functional Behavior Assessment Teacher Input
- MTSS 16 – Positive Behavior Intervention Plan

MTSS Flow Chart

