School Based Intervention Teams

The Intervention Team – KPBSD Policy BP 6164.5

The School Board encourages the cooperation of the parent/guardian, classroom teacher, resource personnel and administrators in studying the needs of students having academic, attendance or behavioral difficulties and in identifying strategies and programs that may resolve or alleviate these difficulties.

The Superintendent will establish Intervention teams at each school site to address the unique needs of students. The Intervention team shall consider the unique educational needs of students including any student considered for, or requesting, retention, acceleration, early graduation, 504 accommodations or placement in an alternative school setting. The Board expects that the Intervention team will improve communication within the school and support teachers in working with the student.

KPBSD Response to Intervention - Explained

Response to intervention (RTI) is the practice of providing high-quality, research-based interventions that are aligned to student need, monitoring progress frequently to make decisions about changes in instruction, and using student achievement data for all important educational decisions.

The RTI process is a model that is used to make decisions involving all students in general education to create a fully integrated system of instruction that is guided by student data. The best possible learning occurs when student skills and abilities closely match the curriculum and instruction within the classroom. Through the RTI model, students at all academic levels can be provided appropriate instruction to increase success and provide enrichment opportunities.

KPBSD supports seven core beliefs regarding RTI, they are:

1. ALL children can learn and achieve high standards as a result of effective teaching,

2. ALL students must have access to a rigorous, standards-based curriculum, and research-based instruction,

3. Providing academic support at the earliest indication of need is necessary for student success,

4. A system of tiered interventions is essential for addressing the full range of student needs,

5. Student results are improved when academic progress is closely monitored and data are used to inform instructional decisions,

6. Collaboration among educators, families and community members is foundational to effective problem-solving and instructional decision making, and

7. Ongoing and meaningful involvement of families increases student success.

The RTI process consists of 5 major characteristics:

1. Data-Based Decision Making, important educational decisions are based on data

2. Universal Screening – an assessment to identify high and low performing students who are at-risk or not meeting predetermined benchmarks

3. Tiered Delivery of Instruction – KPBSD has adopted a three-tier RTI approach with each tier representing increasingly intensive services

4. Progress Monitoring – the practice of assessing students' academic performance on a regular basis

5. Fidelity of Implementation –the delivery of instruction in the way in which it was designed to be delivered.

Data Based Decisions

Decisions in an RTI model are based on professional judgment informed directly by student performance data. Data-based decision making is infused in all components of an RTI practice. At the universal screening level data is used to make decisions about which students are at risk. In the progress monitoring stage data is used to make decisions about the effectiveness of interventions. Decisions to increase or decrease levels of intervention within a Tiered Service Delivery Model are based on student performance data.

Data based decisions regarding student response to intervention is central to RTI practices. Important educational decisions regarding intervention intensity and duration are based on data. Knowing why and for what purpose data is being collected is essential. When the purpose and intent of data collection is known, the data can be used to make various decisions at different times throughout the RTI process. Data can inform whether the implemented interventions are providing positive outcomes for students and can help to identify ineffective interventions.

Data leads to appropriate support and strategic instruction for all students. In a tiered process, the first level of data collection is universal screening. Decisions are then made to determine which students are at risk. Looking at this information, a team may decide if the delivery of the core curriculum should be altered, if more information is needed, or if supplemental instruction needs to be added. Data that is collected throughout the RTI process should also inform the school whether or not the problem exists as a result of the classroom environment, intervention, curriculum, instruction or learner.

Universal Screening

Universal Screening is an assessment by which grade-level critical skills are tested. It identifies high and low performing students who are at risk of not progressing according to expectations or who are suspected of needing additional supplemental services. Universal screening is not a onetime occurrence. Screening will occur three times during the school year across all elementary and middle school grade levels.

Universal screening is important because it is used to identify students who might be in need of closer monitoring in the general education curriculum or who may need intervention. Universal screening represents the first step into consequent tiers of RTI instruction. Each KPBSD elementary and middle school screens students in the areas of reading and math to identify levels of proficiency. Screening can serve the purpose of identifying individuals in need of more diagnostic assessment and possible supplemental intervention. Students who may not have been identified on the first screening may be identified at later screenings. . Universal screening procedures require close collaboration among all staff, general education and specialists.

Screening can provide feedback about total class performance to assist the school leadership in identifying when a teacher might need support. When screening results show evidence that the majority of the class, rather than a few students, is performing below expectation, there is an indication that there should be an examination of the instructional practice or curriculum being used for the whole class.

Multi-tiered Model

The RTI process incorporates a multi-tiered model of educational service delivery. Each tier represents increasingly intensive services that are associated with increasing levels of learner needs. The various tiered interventions are

designed to provide a set of curricular/instructional processes aimed at improving student response to instruction and student outcomes.

The RTI model provides an efficient, needs-driven system to match instructional resources with student need. Instruction in the schools must be differentiated in both nature and intensity to achieve high rates of student success for all students. The RTI tiers are used to efficiently differentiate instruction for all students.

In tier I, which is the core curriculum, instruction should be designed to serve all students with well-supported instructional programs. Tier I is intended to be proactive, preventive and implemented by the classroom teacher. In Tier I, classroom teachers take an active role in the screening, identification, and intervention processes of students judged as at-risk or not meeting adequate progress.

Tier II represents a critical juncture in the RTI process. In conjunction with the core instruction at Tier I, Tier II provides additional timely and research-based instructional strategies to identified students.

 Tier III provides the most intensive interventions available. Students' instructional gaps are identified, progress relative to the gaps is monitored and explicit intensive instruction is provided.

Ideally the three tiers are structured to provide flexible service, and systematically permit students to move in and out of tiered support as needs change.

School staff must work collaboratively in planning and delivering interventions. A seamless system occurs when there is alignment of principles, services, assessments, pre-service training and professional development. By differentiating core instruction, all students can benefit, however when students are not responsive to core delivery, additional instructional options must be considered.

Progress Monitoring

Progress monitoring is the scientifically and/or evidenced based practice of assessing students' academic and behavioral performance on a regular basis. Progress monitoring serves two purposes:

1. To determine whether students are making appropriate progress in the core instructional program.

 2. To build more effective programs for the students who are not making appropriate progress.

Progress monitoring assures that what schools are implementing is working. Ongoing progress monitoring is extremely important. The continual collection of data and measurements provide a unique portfolio outlining student needs. Progress monitoring assists school personnel in making decisions about the appropriate levels of interventions provided to students.

Monitoring progress assists classroom teachers in identifying student performance levels, for example, students who are struggling to make adequate progress. Through monitoring the student's progress using Curriculum Based Measures (CBM), the teacher can adjust instructional strategies, curriculum methods of delivery, etc. to better meet individual student needs.

Gathering classroom or school -wide data is an example of Tier I progress monitoring. If through progress monitoring school personnel determine that appropriate student progress has not been made, the school Intervention team will recommend supplemental instructional programs and practices to reinforce skills and improve progress.

Through the RTI process a student receiving a Tier II level of service would continue to be instructed in the regular classroom. The student would also receive supplemental instruction and frequent progress monitoring by the

classroom teacher or the interventionist. If the results of progress monitoring indicate adequate student achievement, the levels of services in both Tier I and Tier II would continue.

If through continual progress monitoring at Tiers I and II, school personnel determine that appropriate student progress has not been made, the Intervention Team would prescribe more intensive levels of additional instruction. These intensive interventions are specifically designed to meet and address individual student needs. Progress monitoring in Tier III occurs weekly. Students working in a Tier III intervention would no longer receive Tier II support, but would continue with Tier I core instruction. The accumulation of progress monitoring results will help direct a team to alter Tier III interventions or determine if referral for special education services is necessary.

Overall, progress monitoring will assist in defining the level of instruction and curriculum needed by students in all levels of service. Progress monitoring assists schools to ensure interventions match the needs and learning styles of each student.

Fidelity of Implementation

Fidelity of Implementation is the delivery of instruction in the way it was designed to be delivered. Fidelity must also address the integrity with which screening and progress monitoring procedures are completed. In an RTI model, fidelity is important at both the school level (implementation of the process) and teacher level (implementation of research based core curriculum and progress monitoring)

Fidelity of implementation is critical if the RTI process is to be successful. For instruction, or an intervention, to be successful it must be implemented with a high degree of integrity. When schools adopt new initiatives, curriculums, or assessments in name only, without fidelity to essential program design features, results are often poor. Positive student outcomes are attributed to fidelity of intervention implementation at both the school level, and at the teacher level.

Direct and frequent assessment of an intervention for fidelity is recommended as a best practice. When implementing an intervention, it is critical to know whether it is being implemented as designed so that if the intervention is initially unsuccessful, schools can take appropriate measures to remedy the problem rather than abandon the program. The ultimate goal of a fidelity system is to ensure that both the school process of RTI and the instruction at the three tiers are implemented and delivered as intended

RTI – Tier Overview

The interface between RTI and Learning Disability in KPBSD: Tiers explained

Response-to-Intervention (RTI) uses a multi-tiered system of teaching students reading and math. It can also be an effective model for addressing behaviors that impede the student's learning or adversely impact the school environment. Each tier represents an increasingly intensive level of instruction. Students move from one tier to another based on the student's educational needs. This multi-tiered system encourages using all of the resources available to help students master academic skills while using data to rigorously monitor whether the program is working . RTI is not a placement tool with the final goal being special education services. Rather, RTI is a flexible teaching and intervention model for providing instruction to all students that enhances a school's ability to rapidly target students who are struggling academically.
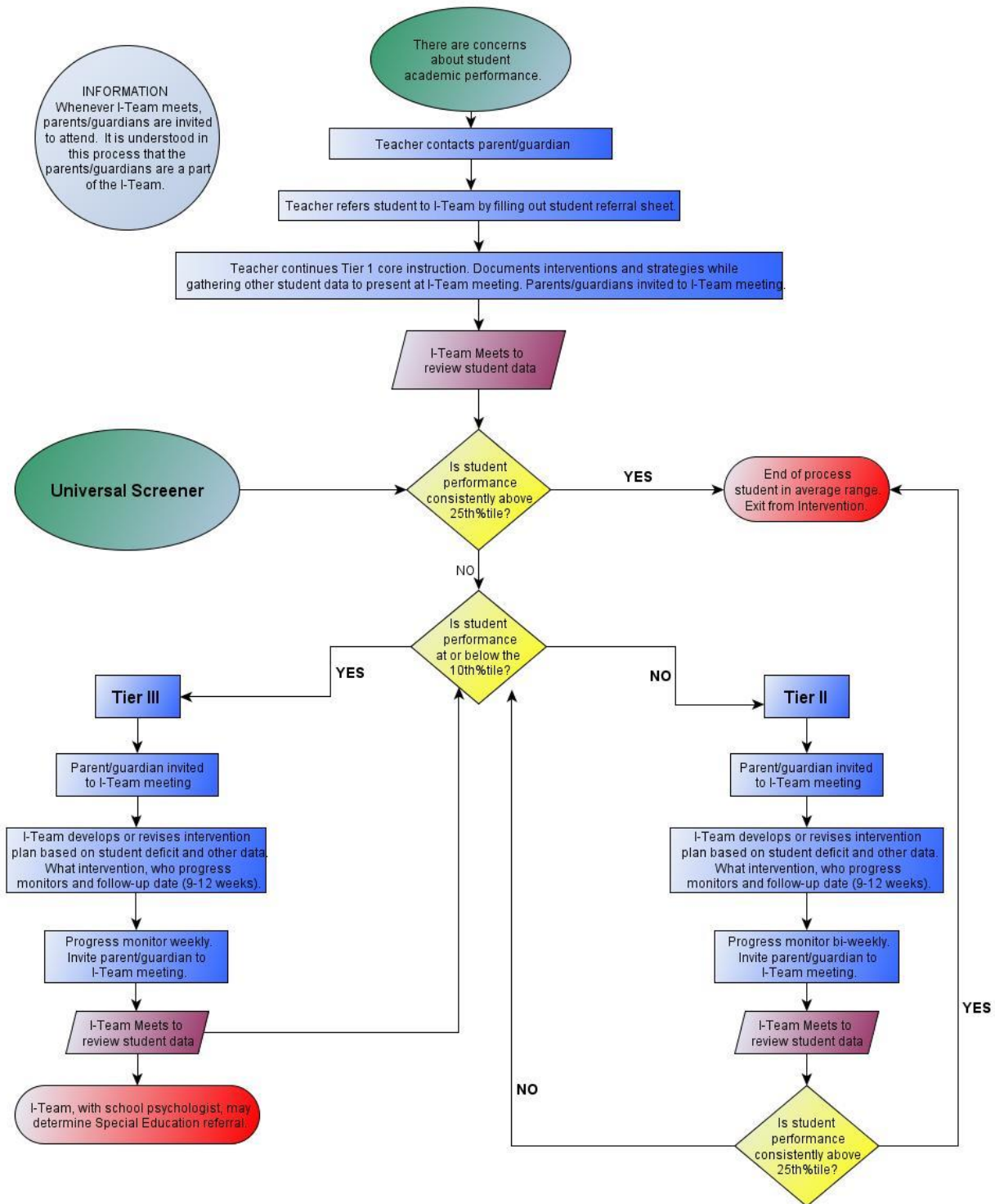
Tier 1 – Core Instruction

KPBSD strives to provide scientifically research-based instruction with rigorous fidelity in the general education classroom. Although academic skill development is currently at the forefront of the District's RTI efforts, Tier 1 can also include student developmental domains such as behavioral and social development. The goal under KPBSD's RTI model is that at least 80 to 90 percent of the student population will master the academic skills and content established. Achieving this requires more than a carefully selected, researched based curriculum. It also requires rigorously trained, highly qualified teachers who carefully follow the curriculum with fidelity and focus their creative efforts on the tactics that help students master the standards imbedded in the curriculum.

Regular screening and assessment (also called progress monitoring) is essential to determining if the instructional program is helping students individually and collectively master the skills and standards at the targeted level. This also helps identify students who need additional intervention to achieve mastery. At Tier 1, progress monitoring involves regularly screening the skill acquisition of all students and is called universal screening.

Universal Screening (Benchmarking) for KPBSD:

- All students in each K-8 KPBSD classroom participate in Universal Screening three times a year: fall, winter, and spring.
- Each school building has a team review the data after it is gathered.
    - Teams identify those individuals students who scores are below the 25th%tile and below the 10th%tile of each classroom
    - Teams also identify if more than 20% of students within a classroom are not meeting the KPBSD benchmark-range goals.
- For classrooms which have greater than 20% of their students below the District's average benchmark-range goals, the school team discusses with the teacher if the entire classroom would benefit from additional or alternate intervention (instructional) approaches until the academic material is mastered by at least 80% of the students.

Flowchart Demonstrating Referral by Teacher
and Referral through Universal Screening

There are concerns about student academic performance.

INFORMATION
Whenever I-Team meets, parents/guardians are invited to attend. It is understood in this process that the parents/guardians are a part of the I-Team.

Teacher contacts parent/guardian

Teacher refers student to I-Team by filling out student referral sheet.

Teacher continues Tier 1 core instruction. Documents interventions and strategies while gathering other student data to present at I-Team meeting. Parents/guardians invited to I-Team meeting.

I-Team Meets to review student data

Universal Screener

Is student performance consistently above 25th%tile?

YES → End of process student in average range. Exit from Intervention.

NO

Is student performance at or below the 10th%tile?

YES → **Tier III**

NO → **Tier II**

Tier III

Parent/guardian invited to I-Team meeting

I-Team develops or revises intervention plan based on student deficit and other data. What intervention, who progress monitors and follow-up date (9-12 weeks).

Progress monitor weekly. Invite parent/guardian to I-Team meeting.

I-Team Meets to review student data

I-Team, with school psychologist, may determine Special Education referral

Tier II

Parent/guardian invited to I-Team meeting

I-Team develops or revises intervention plan based on student deficit and other data. What intervention, who progress monitors and follow-up date (9-12 weeks).

Progress monitor bi-weekly. Invite parent/guardian to I-Team meeting.

I-Team Meets to review student data

Is student performance consistently above 25th%tile?

YES

NO

Referral to I-Team through Universal Screening:

- Students whose scores place them below the 25th%tile of the class following universal screening (benchmarking) will be placed in a Tier II intervention served by the classroom teacher or the interventionist. (I-Team to meet and determine the appropriate Intervention)
- Students whose scores place them below the 10th%tile of the class following universal screening (benchmarking) will be placed in a Tier III intervention served by the classroom teacher or the interventionist. (I-Team to meet and determine the appropriate Intervention)
- During the RTI process, the I-Team examines whether specific alternate explanations account for the student's difficulties with academic progress in the general education class. Specific alternate explanations that are typically assessed and addressed include:
    - Hearing problems which are either verified by a certified audiologist or do not meet school screening minimums and suggest the need for further hearing evaluation.
    - Vision problems which are either verified by a state certified medical provider or do not meet school screening minimums and suggest the need for further evaluation.
    - Receptive and/or expressive language impairments verified by a certified speech/language clinician and evident prior to the introduction of academic subject matter.
    - Medical problems which adversely impact the student's behavior, skill acquisition or performance. (Note: Some students with Attention Deficit Disorder (ADD) or Attention Deficit-Hyperactivity Disorder (ADHD) may benefit from the RTI process or a 504 Accommodation Plan as opposed to being directly referred to Special Education as a student with a health impairment. The RTI process would help determine if academic problems exist concurrently with the medical problems.)
    - Significant emotional factors which can be verified by a physician or psychologist and adversely impact the student's learning, performance, or a majority of his/her relationships in school. (Note: Students being considered for Special Education under an emotional disability should most likely become involved with a behavior specialist prior to Special Education referral and may additionally benefit from the RTI process to determine if academic problems exist concurrently with emotional problems.)
    - Significant sub-average intellectual functioning and significantly sub-average adaptive behavior (daily living skills).
    - External traumatic brain injury which must be verified by medical records.
    - Orthopedic problems which must be verified by medical records.
    - Autism Spectrum Disorder (ASD) verified by a physician or psychologist.
    - Has the student received inadequate exposure to academic information and, therefore is not disabled but requires remediation. The following factors often adversely impact the student's education: Frequent moves, changing districts and missing the specific instruction because of program variations, home stressors, insufficient attendance, frequent tardies, individual differences related to readiness for the subject matter, teacher instructional approach/tactics

Note In essence, RTI involves creating a single-subject (student) intervention plan (SIP) similar to the single-subject research process. The RTI process separates those students who are able to learn the subject matter when provided remedial or alternative approaches in small groups from those students who are unable to master the academic material regardless of the approach used in the general education setting.

Referral to I-Team by teacher (if parent wants to refer they work with teacher to complete process):

- Students whose academic performance is a concern for the teacher should be referred to the Intervention-Team (I-Team).

- The classroom teacher obtains and completes the I-Team referral forms from the KPBSD website labeled "I-Team Forms".
- BEFORE the I-Team discusses a student, the KPBSD I-Team referral forms must be fully completed by the teacher in order to assist the I-Team with intervention planning for the student.
- During the RTI process, the I-Team examines whether specific alternate explanations account for the student's difficulties with academic progress in the general education class. Specific alternate explanations that are typically assessed and addressed include:
  - Hearing problems which are either verified by a certified audiologist or do not meet school screening minimums and suggest the need for further hearing evaluation.
  - Vision problems which are either verified by a state certified medical provider or do not meet school screening minimums and suggest the need for further evaluation.
  - Receptive and/or expressive language impairments verified by a certified speech/language clinician and evident prior to the introduction of academic subject matter. (Note: Students with receptive or expressive language impairment frequently become involved with early interventions under the Early Childhood Developmental Delay, or ECDD, category.)
  - Medical problems which adversely impact the student's behavior, skill acquisition or performance. (Note: Some students with Attention Deficit Disorder (ADD) or Attention Deficit-Hyperactivity Disorder (ADHD) may benefit from the RTI process or a 504 Accommodation Plan as opposed to being directly referred to Special Education as a student with a health impairment. The RTI process would help determine if academic problems exist concurrently with the medical problems.)
  - Significant emotional factors which can be verified by a physician or psychologist and adversely impact the student's learning, performance, or a majority of his/her relationships in school. (Note: Students being considered for Special Education under an emotional disability should most likely become involved with a behavior specialist prior to Special Education referral and may additionally benefit from the RTI process to determine if academic problems exist concurrently with emotional problems.)
  - Significant sub-average intellectual functioning and significantly sub-average adaptive behavior (daily living skills).
  - External traumatic brain injury which must be verified by medical records.
  - Orthopedic problems which must be verified by medical records.
  - Autism Spectrum Disorder (ASD) verified by a physician or psychologist.
  - Has the student received inadequate exposure to academic information and, therefore is not disabled but requires remediation. The following factors often adversely impact the student's education: Frequent moves, changing districts and missing the specific instruction because of program variations, home stressors, insufficient attendance, frequent tardies, individual differences related to readiness for the subject matter, teacher instructional approach/tactics

Tier 2 – Intervention:

- Students whose scores are between the 25th%tile and the 11th%tile based on the National Norms of their grade are provided strategic interventions in the area(s) of concern in addition to core instruction in the general education setting.
- Tier 2 interventions for reading are strongly recommended to be a minimum of 3 sessions per week for a minimum of 20-30 minutes each session in addition to core instruction and for math 10 minutes daily (can be embedded in core instruction).
- Tier 2 interventions are implemented consistently for 9-12 week (6-12 for behavior).
- They typically are provided in small groups of students.
- Tier 2 interventions must be provided by trained personnel who have experience teaching the intervention, can consistently make each session, and who endorse the importance of adhering to the research based protocol for the intervention.
- The I-Team determines which interventions are most appropriate for the student.
- Students may benefit from and be provided more than one Tier 2 intervention consecutively or the same intervention repeatedly if it promotes adequate mastery.
- Progress monitoring probes are administered bi-weekly (at least two times per month) or more on grade-level as determined by the I-Team as determined by the I-Team.
- Data must be entered promptly
- The following is documented in PowerSchool:
  - The intervention used (the intervention can be one research strategy or a combination of several appropriate strategies providing the protocol is followed)
  - The dates of the intervention (start date and end date)
  - The amount of time the intervention is administered per session
  - The name of the individual who is providing the intervention
  - The student's attendance during the intervention
- If a student is not exhibiting academic progress (a rate of improvement ROI that will close the gap), the I-Team reconvenes and determines the next intervention strategy: another Tier 2 intervention or go to Tier 3.

Tier 3 – Interventions:

NOTE: I-Team's that are meeting to discuss moving students to Tier 3 MUST invite the school psychologist and the student's parents though they are not required to attend.

- Students whose scores are in the lowest 10th%tile based on the National Norms of their grade are provided intensive interventions (Tier 3) in the area(s) of concern in addition to core instruction in the general education setting
- Tier 3 interventions for reading are provided daily for 45-60 minutes in addition to core instruction (this can be in one session or divided into two sessions where at least 30 minutes should be direct instruction with a teacher) and for math 15 minutes daily (can be embedded in core instruction).
- Tier 3 interventions are implemented consistently for 9-12 week (6-12 for behavior).
- They typically are provided in small groups or individually.

- Tier 3 interventions must be provided by trained personnel who have experience teaching the intervention, can consistently make each session, and endorse the importance of adhering to the research based protocol for the intervention.
- The I-Team determines which interventions should be implemented at this Tier
- Students may benefit from and be provided more than one Tier 3 intervention consecutively or the same intervention repeatedly if the data supports it promotes adequate skill or content mastery.
- Progress monitoring probes are administered weekly on grade level and entered promptly.
- The following is documented in PowerSchool:
  - The intervention used (the intervention can be one research strategy or a combination of several appropriate strategies providing the protocol is followed)
  - The dates of the intervention (start date and end date)
  - The amount of time the intervention is administered per session
  - The name of the individual who is providing the intervention
  - The student's attendance during the intervention
- Targeted formal skill assessments may be conducted at any time during Tier 3 providing written parental consent has been obtained and the school psychologist consulted.
- If a student does not exhibit academic progress (a rate of improvement ROI that will close the gap), the I-Team reconvenes and determines the next intervention strategy: another Tier 3 intervention or referral to special education.

NOTE: For our small school with less than five teachers, this rigorous of a Tiered process may be impractical. While efforts should be made to provide Tiered intervention, the process of determining a learning disability may be better suited with a Pattern of Strengths and Weaknesses model. Please work with your school's psychologist.

RTI for Younger Students

In most cases, evaluating young students for learning disabilities should be done with caution. Because academic skills are just beginning to develop at this it is often difficult to identify significant academic deficits. For example, for kindergarten students, we benchmark and monitor their ability to name letters (Letter-Naming Fluency CBM probes). A deficit in this area does not necessarily indicate a difficulty in basic reading skills because the child has not been taught to read yet. Furthermore, the team needs to implement tiered interventions and collect 12 data points in order to determine if the student is making progress and these should be developmentally appropriate. Please see guidance from the RTI committee regarding appropriate interventions for younger students. If other areas are of concern, such as speech/language, adaptive/self-help skills, motor issues and/or emotional concerns, then it may be more prudent to assess students with the category of Early Childhood Developmental Delay (ECDD) in mind.

RTI –Roles for stakeholders

Principal Role:

- Select an I-Team Chair
- The principal provides leadership and actively promotes RTI which influences how the entire team collaborates and makes the RTI process work
- Ensures that Tier 1 instruction is occurring with fidelity through regular classroom observations
- Ensures that assessments used throughout the RTI process are administered with fidelity
- Implements schedules that protect core instructional time while providing time for intervention
- Helps the team focus on the reasons the general education curriculum is not working for the child

Psychologist Role:

- Become involved by Tier 3 with data review and intervention meetings
- Assist in analyzing and synthesizing data
- Consult with I-teams as needed regarding data as well as available or appropriate research-based interventions
- Conduct Functional Behavioral Assessments when behavior is impeding learning
- With parent permission, administer targeted formal skill assessments that will provide additional information about a Tier 3 student

Interventionist Role:

- Collaborate with general education teachers, teachers providing interventions, parents, and appropriate professionals
- Deliver interventions at Tier 2 and Tier 3 (priority in schedule given to Tier III first)
- Progress monitor Tier 2 students biweekly and enters data promptly
- Progress monitor Tier 3 students weekly and enters data promptly
- Add intervention lines when there are changes
- Attend district training for RTI, I-teams, and other district intervention programs or tools

I-Team Chair role:

- Will be required to manage the PowerSchool Intervention Database
- Set up and attend all I-Team meetings
- Ensure Universal Screening Data/Benchmarks are reviewed by the I-Team 3 times a year

Title I Teacher Role:

- Collaborate with general education teachers, teachers providing interventions, parents, and appropriate professionals
- Deliver interventions at Tier 2 and Tier 3 (when appropriate)
- Progress monitor Tier 2 students biweekly and enters data promptly
- Progress monitor Tier 3 students weekly and enters data promptly
- Add intervention lines when there are changes.

The Special Education Teacher Role:

- Understand the RTI tier process
- Deliver Tier 3 level interventions when appropriate and with Pupil Services Dept. approval
- Progress monitor Tier 3 students weekly and enters data promptly
- Add intervention break lines when there are changes.
- Participate in I-Team meetings for all Tier 3 students
- Collaborate with general education teacher for the Tier 3 students when delivering interventions
- May do a targeted formal skill assessments for informational purposes for a Tier 3 student with parent permission

The General Education Teacher:

- Deliver the district adopted core curriculum with fidelity
- Understand the RTI tier process
- Complete Universal Screening (benchmark testing) 3 times per year for all students
- Deliver Tier 1 interventions (i.e. those implemented in regular classroom by the student's teacher) to at-risk students
- Progress monitor students who are at-risk for learning problems but not yet referred to I-team
- Enter data promptly
- Add intervention break line when the intervention changes
- Participate in all I-Team meeting for his/her students
- Provide Tier II and Tier III interventions when needed.
- Collaborate with teacher delivering the Tier 2 or Tier 3 interventions
- Communicate regularly with parents of students being considered for I-team referral
- Keep parents informed of student progress during implementation of interventions

The Parent Role:

- Attend I-Team meetings for his/her child and be a part of the decision making process
- Become familiar with the RTI process
- Communicate concerns and seek updates regarding their child's progress in school
- Support interventions by ensuring regular student attendance and encouraging student effort
- Provide the student's basic needs

The Student Role:

- Possibly attend I-Team meetings if age appropriate and be a part of the decision making process