
New Roles in Response to Intervention: Creating Success for Schools and Children

November 2006

A Collaborative Project With:

The American Speech-Language-Hearing Association (ASHA)
Council of Administrators of Special Education (CASE)
Council for Exceptional Children (CEC)
Council for Learning Disabilities (CLD)
Division for Learning Disabilities (DLD)
International Dyslexia Association (IDA)
International Reading Association (IRA)
Learning Disabilities Association of America (LDA)
National Association of State Directors of Special Education (NASDSE)
National Association of School Psychologists (NASP)
National Center for Learning Disabilities (NCLD)
National Education Association (NEA)
School Social Work Association of America (SSWAA)

Response to Intervention

The challenge teaching in a nation of over 300 million people, 53 million students, and almost 100,000 elementary and secondary schools is to enhance each child's unique abilities while working in a class and a school. Response to intervention, or RTI, is an example of one of these challenges. Over the last nine months the groups who are represented here, and others met to discuss how best to encourage the use of RTI and each school's unique range of professionals to meet the education needs of all of their students. This group of papers represents a different approach to working on public policy. We didn't seek an agreement on specific text, rather we sought to describe how professionals could take active roles to contribute their unique knowledge and perspective in new ways for each child's needs. When you have read all of these papers, you will note that each staff member in each school building who works with struggling students has a role to play. We hope this encourages all of us to find more common ground to continue to work in the best interest of children.

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Introduction to RTI “Roles” Papers

The Responsiveness to Intervention (RTI) process is a multi-tiered approach to providing services and interventions to struggling learners at increasing levels of intensity. RTI can be used for making decisions about general, compensatory, and special education, creating a well-integrated and seamless system of instruction and intervention guided by child outcome data. RTI calls for early identification of learning and behavioral needs, close collaboration among teachers and special education personnel¹ and parents, and a systemic commitment to locating and employing the necessary resources to ensure that students make progress in the general education curriculum. RTI is an initiative that takes place in the general education environment.

Numerous national organizations have contributed their time to this document. However, this is not a “consensus” document and organizations have not endorsed the job roles written by other organizations representing their own constituencies. The following organizations have participated in this process:

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School personnel can play a number of important roles in using RTI to identify children with disabilities and provide needed instruction to struggling students. These roles will require some fundamental changes in the way general education and special education engage in assessment and intervention activities. Collaborative roles vary with the settings and experiences of those involved. Parents also need to know how an RTI process may help their child and be informed that at any time they may request a formal full evaluation to determine eligibility for special education.

RTI may include the following conditions and activities:

- High quality instructional and behavioral supports are in place.
- Scientific, research-based intervention is delivered by qualified personnel with expertise in the intervention used and in the areas of student difficulty.
- Student progress is continuously monitored.
- Data-based documentation is maintained on each student.
- Systematic documentation verifies that interventions are implemented with fidelity, integrity, and the intended intensity.
- Decisions are made by a collaborative team of school staff who review response data and other information required to ensure a comprehensive evaluation.

¹ These personnel include but are not limited to classroom teachers, school psychologists, reading specialists, school social workers, school counselors, occupational therapists, physical therapists, speech-language pathologists, audiologist, learning disabilities specialists, and other specialized instructional support personnel (related/pupil services personnel).

- Interventions address the individual student’s difficulties at the needed level of intensity and with the support of needed resources and personnel.
- A written document describing the specific components and structure of the process to be used is available to parents and professionals.
- Parent notification and involvement are documented.

As a school-wide prevention approach, RTI includes changing instruction for struggling students to help them improve academic skills and behavior. To meet the needs of all students, the educational system must use its collective resources to intervene early and provide appropriate interventions and supports to prevent learning and behavioral problems from becoming larger issues. To support these efforts, the Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004) gives more financial flexibility to local education agencies (LEAs). Under the Early Intervening Services (EIS) provisions in the law, to help minimize over identification and unnecessary referrals, LEAs can use up to 15 % of their federal IDEA funds to provide academic and behavioral services to support prevention and early identification for struggling learners [P.L. 108-446, §613(f) (1)]. LEAs also have greater flexibility to use up to 50% of any increases that they receive in federal funding for Title I activities. These funds may be used for professional development of non-special education staff as well as for RTI-related activities.

Students who are not achieving when given high quality instruction may have a disability. RTI may be used as part of a process to identify students with specific learning disabilities rather than relying on the use of a discrepancy model as a means of identification. This approach was authorized in IDEA 2004 in the following provision:

- (a) local education agencies (LEAs) may use a student's response to scientifically-based instruction as part of the evaluation process; and (b) when identifying a disability, LEAs shall not be required to take into consideration whether a child has a severe discrepancy between achievement and intellectual ability [P.L. 108-446, §614(b)(6)(A)].

The purpose of this document is to identify the key roles that school personnel and parents can undertake when an LEA or school decides to adopt an RTI strategy. It is not intended to be an exhaustive list of these roles, but hopefully will serve to provide some suggestions and information for all of those who can become involved in the RTI process. It is also not intended to provide comprehensive guidance on RTI.



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Responsiveness to Intervention: New Roles for Speech-Language Pathologists

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The responsiveness to intervention (RTI) process is a multitiered approach to providing services and interventions to struggling learners at increasing levels of intensity. It involves universal screening, high-quality instruction and interventions matched to student need, frequent progress monitoring, and the use of child response data to make educational decisions. RTI should be used for making decisions about general, compensatory, and special education, creating a well-integrated and seamless system of instruction and intervention guided by child outcome data.

As a schoolwide prevention approach, RTI includes changing instruction for struggling students to help them improve performance and achieve academic progress. To meet the needs of all students, the educational system must use its collective resources to intervene early and provide appropriate interventions and supports to prevent learning and behavioral problems from becoming larger issues. To support these efforts, the Individuals with Disabilities Education Improvement Act of 2004 (IDEA '04) allows up to 15% of special education funds to be used to provide early intervening services for students who are having academic or behavioral difficulties but who are not identified as having a disability.

RTI also provides an alternative to the use of a discrepancy model to assess underachievement. Students who are not achieving when given high-quality instruction may have a disability. This approach was authorized in IDEA '04 through the following provisions: (a) local education agencies (LEAs) may use a student's response to scientifically based instruction as part of the evaluation process, and (b) when identifying a disability, LEAs shall not be required to take into consideration whether a child has a severe discrepancy between achievement and intellectual ability.

Speech-language pathologists (SLPs) can play a number of important roles in using RTI to identify children with disabilities and provide needed instruction to struggling students in both general education and special education settings. But these roles will require some fundamental changes in the way SLPs engage in assessment and intervention activities.

Challenges and Opportunities of the New Model

RTI requires changes in terms of assessment approaches as well as models of intervention and instructional support. Regarding assessment, there are challenges to SLPs working in districts that undertake the shift from traditional standardized approaches to a more pragmatic, educationally relevant model focused on measuring changes in individual performance over time. Such challenges include the shift from a “within child” deficit paradigm to a contextual perspective; a greater emphasis on instructional intervention and progress monitoring prior to special education referral; an expansion of the SLP’s assessment “tool kit” to include more instructionally relevant, contextually based procedures; and most likely the need for additional professional development in all of the above. In addition, the use of formal evaluation procedures may still be an important component of RTI in many districts. Teams must still conduct relevant, comprehensive evaluations using qualified personnel. SLPs’ expertise in language may be called upon to round out comprehensive profiles of students having academic or behavioral difficulties.

Regarding intervention and instructional support, SLPs must engage in new and expanded roles that incorporate prevention and identification of at-risk students as well as more traditional roles of intervention. Their contribution to the school community can be viewed as expertise that is used through both direct and indirect services to support struggling students, children with disabilities, the teachers and other educators who work with them, and their families. This involves a decrease in time spent on traditional models of intervention (e.g., pull-out therapy) and more time on consultation and classroom-based intervention. It also means allocation and assignment of staff based on time needed for indirect services and support activities, and not based solely on direct services to children with disabilities.

New and Expanded Roles

SLPs working in districts that choose to implement RTI procedures are uniquely qualified to contribute in a variety of ways to assessment and intervention at many levels, from systemwide *program design* and *collaboration* to work with *individual students*. SLPs offer expertise in the language basis of literacy and learning, experience with collaborative approaches to instruction/intervention, and an understanding of the use of student outcomes data when making instructional decisions.

Program Design

SLPs can be a valuable resource as schools design and implement a variety of RTI models. The following functions are some of the ways in which SLPs can make unique contributions:

- Explain the role that language plays in curriculum, assessment, and instruction, as a basis for appropriate program design
- Explain the interconnection between spoken and written language

- Identify and analyze existing literature on scientifically based literacy assessment and intervention approaches
- Assist in the selection of screening measures
- Help identify systemic patterns of student need with respect to language skills
- Assist in the selection of scientifically based literacy intervention
- Plan for and conduct professional development on the language basis of literacy and learning
- Interpret a school's progress in meeting the intervention needs of its students

Collaboration

SLPs have a long history of working collaboratively with families, teachers, administrators, and other special service providers. SLPs play critical roles in collaboration around RTI efforts, including the following:

- Assisting general education classroom teachers with universal screening
- Participating in the development and implementation of progress monitoring systems and the analysis of student outcomes
- Serving as members of intervention assistance teams, utilizing their expertise in language, its disorders, and treatment
- Consulting with teachers to meet the needs of students in initial RTI tiers with a specific focus on the relevant language underpinnings of learning and literacy
- Collaborating with school mental health providers (school psychologists, social workers, and counselors), reading specialists, occupational therapists, physical therapists, learning disabilities specialists, and other specialized instructional support personnel (related/pupil services personnel) in the implementation of RTI models
- Assisting administrators to make wise decisions about RTI design and implementation, considering the important language variables
- Working collaboratively with private and community-employed practitioners who may be serving an individual child
- Interpreting screening and progress assessment results to families
- Helping families understand the language basis of literacy and learning as well as specific language issues pertinent to an individual child

Serving Individual Students

SLPs continue to work with individual students, in addition to providing support through RTI activities. These roles and responsibilities include the following:

- Conducting expanded speech sound error screening for K-3 students to track students at risk and intervene with those who are highly stimulable and may respond to intense short-term interventions during a prolonged screening process rather than being placed in special education
- Assisting in determining “cut-points” to trigger referral to special education for speech and language disabilities
- Using norm-referenced, standardized, and informal assessments to determine whether students have speech and language disabilities
- Determining duration, intensity, and type of service that students with communication disabilities may need
- Serving students who qualify for special education services under categories of communication disabilities such as speech sound errors (articulation), voice or fluency disorders, hearing loss, traumatic brain injury, and speech and language disabilities concomitant with neurophysiological conditions
- Collaborating with classroom teachers to provide services and support for students with communication disabilities
- Identifying, using, and disseminating evidence-based practices for speech and language services or RTI interventions at any tier

Meeting the Challenge

The foundation for SLPs’ involvement in RTI has been established through the profession’s policies on literacy, workload, and expanded roles and responsibilities. The opportunities for SLPs working within an RTI framework are extensive. To some, these opportunities may seem overwhelming—where in the workday would there be time to *add* all of these activities to our current responsibilities? Certainly if the traditional roles continue, it would be difficult to expand into these new roles. The point of RTI, however, is not to add more tasks but to reallocate time to better address prevention and early intervention, and in the long run serve more students up front rather than at the point of special education evaluation and service. Where RTI has been faithfully implemented, this seems to be the outcome. Some districts report reductions in special education referral and placement; even where placement rates have remained stable, staff nevertheless report a change in the way they spend their time. The reallocation of effort will

hopefully lead to more effective interventions, both for students who remain in general education and those who ultimately qualify for more intensive services.

Successful RTI programs rely on the leadership of a strong principal or designated leader who has budgetary power and the ability to bring all educators to the same table to share professional development, children, time, space, money, and curriculum resources. The sharing of resources is sometimes a stumbling block, yet strong leaders can overcome these barriers by keeping the focus on the children being helped. SLPs can begin the RTI process by sharing with principals the benefits of an RTI approach and the support offered through IDEA, including the incentive that 15% of a school's special education funds can be used to launch the RTI process.

To meet this challenge, SLPs will need to be

- open to change—change in how students are identified for intervention; how interventions are selected, designed, and implemented; how student performance is measured and evaluated; how evaluations are conducted; and how decisions are made;
- open to professional development—training (as needed) in evidence-based intervention approaches, progress monitoring methods, evaluation of instructional and program outcomes, and contextually based assessment procedures, and the implications for both preservice and in-service training;
- willing to adapt a more systemic approach to serving schools, including a workload that reflects less traditional service delivery and more consultation and collaboration in general education classrooms;
- willing and able to communicate their worth to administrators and policymakers—to educate others on the unique contributions that SLPs can make consistent with the provisions of IDEA '04.

IDEA '04 does not mandate significant change or prohibit traditional practices. Rather, it encourages the adoption of new approaches that promise better student outcomes. Such innovations in education offer numerous opportunities to enhance speech-language services to the benefit of all students.

Key Resources

American Speech-Language-Hearing Association (2006). Responsiveness-to-intervention technical assistance packet. Available at www.asha.org

Butler, K., & Nelson, N. (Eds.) (2005). Responsiveness to intervention and the speech-language pathologist [Special issue]. *Topics in Language Disorders*, 25(2). (See six articles on RTI and SLPs.)

International Reading Association (2006). *The Role of Reading Instruction in Addressing the Overrepresentation of Minority Children in Special Education in the United States*.

Available: www.reading.org

Mellard, D. (2004). *Understanding responsiveness to intervention in learning disabilities determination*. Available from www.nrld.org/publications/papers/mellard.html

National Association of State Directors of Special Education. (2005). *Response to intervention: Policy considerations and implementation*. Available from www.nasdse.org

National Joint Committee on Learning Disabilities (2005). *Responsiveness to intervention and learning disabilities*. Available: www.ldonline.org

School Social Work Association of America (2006). *Response to Intervention*. Available: www.sswaa.org

Strangman, N., Hitchcock, C., Hall, T., Meo, G., & Coyne, P. (2006). Response-to-instruction and universal design for learning: How might they intersect in the general education classroom? Available: www.k8accesscenter.org/documents/RTIandUDLFinal.2.pdf

Adapted with permission from *Problem Solving and RTI: New Roles for School Psychologists* by Andrea Canter, 2006, February, *Communique*, 34(5). Available from www.nasponline.org

American Speech-Language-Hearing Association
2200 Research Boulevard, Rockville, MD 20850
www.asha.org



The Role of the Teacher of Students with Learning Disabilities in the RTI Process

At the core of No Child Left Behind (NCLB), passed in 2001, is the goal that all children have the opportunity to achieve in school. The law emphasizes the importance of well-prepared professionals, evidence-based practice and accountability. In 2004, the reauthorization of the Individuals with Disabilities Improvement Act of 2004 (IDEA 2004), aligned with NCLB, and changed the landscape of identification and service delivery for students with disabilities.

The long-established policies used by school systems to identify students as being eligible for special education have undergone close scrutiny. Because of concerns about the increase in the number of students being identified as having learning disabilities, the overrepresentation of minority populations and the problems associated with "wait-to-see" discrepancy models, IDEA 2004 expands the options for identifying learning disabilities by permitting school systems to use response to instruction as part of the evaluation process and by not requiring the identification of a significant discrepancy between ability and achievement.

In section 614, the language states that "when determining whether a child has a specific learning disability," a local education 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."

IDEA 2004 continues to define specific learning disability as "a disorder in 1 or more of the basic psychological processes involved in understanding or in using language, spoken, or written, which disorder may manifest itself in the imperfect ability to listen, think, speak, write, spell, or do mathematical calculations." The term includes "conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia." The term does not include "a learning problem that is primarily the result of visual, hearing, or motor disabilities, of mental retardation, of emotional disturbance, or of environmental, cultural or economic disadvantage."

Local Education Agencies across the nation are making systemic changes to comply with the mandates of NCLB and IDEA 2004.

Challenges and Opportunities

NCLB and IDEA 2004 provide a special opportunity for positive change in the field of learning disabilities. Most professionals with expertise in learning disabilities agree that an alternative to the use of a rigid IQ-Achievement Discrepancy formula is an important step forward; however, since both NCLB and IDEA 2004 require evidence-based approaches, any alternative procedures used to identify students with Learning Disabilities should have a sufficient base of evidence that demonstrates the efficacy of the procedure for identifying students with Learning Disabilities with maximum accuracy and minimal false positives and negatives. Existing studies indicate RTI is a promising practice but more research is needed to assess its efficacy as a procedure to identify specific learning disabilities.

New and Expanding Roles

The new laws also emphasize the use of evidence-based practice in the general education program prior to evaluation for special education and establish models in which students move through tiers of instruction based on level of need. Some models have 3 levels and others have 4, but all models follow a similar process. The first tiers ensure children receive appropriate instruction initially to minimize identification of students as having Learning Disabilities when the problem may be the result of lack of exposure to appropriate instruction. Then, progress is monitored continuously and a student who is not making expected progress is referred to a RTI Problem Solving team, comprised of well-prepared professionals. The team reviews the data and recommends changes that provide additional support for the student, which may result in the student moving to a more intense level of instruction. Recommendations related to instruction, behavior and/or social-emotional issues are made and implemented in the general education program in the 2nd or 3rd tier, depending on the model being used.

For students who are in the 2nd (or 3rd tiers), instruction is provided in smaller groups and may be more intense, frequent or specialized. Programs that have been shown to remediate skills successfully but that are not typically used for initial instruction may be implemented. Continuous progress monitoring produces data about student progress/needs and decisions about instruction, movement between tiers and programmatic changes continue to be made by the problem solving team.

For students who continue to struggle, the problem solving team may recommend moving the students to the last tier. These students have moved through the general education tiers, and data from continuous progress monitoring identified them as a group of students who are still not responding to instruction and who may, or may not, have specific learning disabilities. At this point, a comprehensive evaluation should be designed and conducted to obtain additional data about cognition, achievement, behavior and/or social-emotional

characteristics to see if a learning disability is present, identify individual student needs and plan remediation. If intelligence data is needed to rule out ability as a factor affecting progress or if the behavioral/social-emotional problems are primary, the school psychologist could conduct an assessment, which would include an intellectual assessment (IQ testing). The specialist in learning disabilities would administer formal and informal measures to conduct a comprehensive educational evaluation that obtains data on listening, thinking, speaking, writing, spelling, fluency and mathematics.

Based on the results of the assessment, the specialist in learning disabilities should translate the data into recommendations to inform instruction, develop behavioral change programs and implement learning supports. The assessment data should be shared and discussed with the Problem Solving team so accommodations, modifications or learning supports can be put in place in the general education program. The teacher of students with learning disabilities would provide individualized instruction, which is the hallmark of special education, in an inclusive, small group or one-to-one setting based on the student's needs and progress. Continuous monitoring of progress would continue to guide instruction and changes would be initiated as needed.

With the emphasis on the use of evidence-based practice, continuous progress monitoring and instructional supports available in the general education program, the teacher of students with learning disabilities will be able to work with students who truly have specific learning disabilities, meaning significant variation documented by the assessment data and unexpected weaknesses in achievement. Education plans, interventions and learning supports would be designed based on the individual student's needs if a specific learning disability is identified. Students who are not identified as having specific learning disabilities, but who are also not achieving, would receive services implemented by other professionals such as school psychologists, behavioral specialists, speech-language therapists and guidance counselors.

At the 3rd or 4th tier, the majority of students will receive special education services. The student's movement through the tiers demonstrates the need for more individualized instruction, behavioral intervention and learning supports than available in the general education curriculum/setting. Special education for students with Learning Disabilities would be geared to the needs of the individual student and on-going adjustments would be made by the teacher of students with Learning Disabilities based on both quantitative and qualitative analysis of the student's performance.

Meeting the Challenge

Teachers of students with learning disabilities will need to acquire specialized knowledge to individualize instruction, to build skills and recommend

modifications/accommodations needed for students with Learning Disabilities to be successful in the general curriculum.

Within the RTI framework, professional development will be needed to prepare these teachers to be able to:

understand and apply pedagogy related to cognition, learning theory, language development, behavior management and applied behavioral analysis,

possess a substantial base of knowledge about criteria for identifying scientific research-based methodology, instructional programs/methodology available for use with students with Learning Disabilities and individualization of instruction,

be proficient in providing direct skill instruction in reading, writing, spelling, math, listening and learning strategies,

be able to adjust instruction and learning supports based on student progress, observation and clinical judgment,

conduct comprehensive evaluations that include standardized assessment measures, informal assessment and behavioral observations as well as translate the data into meaningful educational recommendations,

explain test results to help parents and teachers understand the student's needs and the recommendations generated during the assessment process,

possess strong communication skills to function as collaborative partners and members of problem solving teams,

be knowledgeable about the legal requirements of IDEA 2004, Federal and state regulations, and the history of learning disabilities.

Resources and References

Division for Learning Disabilities of the Council for Exceptional Children, *Learning Disabilities Research and Practice*, 2003, Vol. 18, No.3

Division for Learning Disabilities website: www.TeachingLD.org

Adapted from *Problem Solving and RTI: New Roles for School Psychologists*, by Andrea Canter, National Association of School Psychologists, *Communiqué*, 34, (5), insert, 2006. Available: www.nasponline.org

National Association of State Directors of Special Education. *Response to Intervention: Policy Considerations and Implementation. Response to Intervention: NASDSE and CASE White Paper on RTI*. Available: www.nasdse.org

National Joint Committee on Learning Disabilities. *Responsiveness to Intervention and Learning Disabilities*. Available: www.ldonline.org

School Social Work Association of America. *Response to Intervention*. Available: www.sswaa.org

International Reading Association. *The Role of Reading Instruction in Addressing the Overrepresentation of Minority Children in Special Education in the United States*. Available: www.reading.org

The Role of Reading Intervention Specialists In the RTI Process

I. INTRODUCTION

The Responsiveness to Intervention (RTI) process is a multi-tiered approach to providing services and interventions to struggling learners at increasing levels of intensity. RTI can be used for making decisions about general, compensatory, and special education, creating a well-integrated and seamless system of instruction and intervention guided by child outcome data. RTI calls for early identification of learning and behavioral needs, close collaboration among teachers and special education personnel² and parents, and a systemic commitment to locating and employing the necessary resources to ensure that students make progress in the general education curriculum. RTI is an initiative that takes place in the general education environment.

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The purpose of this document is to identify the key roles that school personnel and parents can undertake when an LEA or school decides to adopt an RTI strategy. It is not intended to be an exhaustive list of these roles, but hopefully will serve to provide some suggestions and information for all of those who can become involved in the RTI process. It is also not intended to provide comprehensive guidance on RTI.

II. CHALLENGES AND OPPORTUNITIES OF THE NEW MODEL

Traditionally the International Dyslexia Association (IDA) has focused on disseminating information and providing services to professionals and parents who are concerned with the welfare of the most severely impaired student with reading disabilities. Therefore, IDA members have a unique depth of knowledge regarding effective instructional approaches and methodologies for students who struggle to learn.

For purposes of this paper, the term Reading Intervention Specialist refers to any IDA member with documented expertise in the relationships among language, reading, and writing with the ability to apply that knowledge in the identification, prevention, and treatment of reading difficulties, whether they be mild, moderate, or severe. Requirements for training and certifying reading specialists vary from state to state, so IDA member Reading Intervention Specialists may or may not be certified or licensed. Some national professional groups, such as the Association of Academic Language Therapists and the International Multisensory Structured Language Education Council, do require expertise in structured language teaching when certifying reading specialists and reading specialist training programs, however, such certification is not a hiring requirement in public schools. The professional background of a Reading Intervention Specialist may be in educational psychology, learning disabilities, speech and language, reading and language, or special education.

The RTI process challenges the Reading Intervention Specialist to broaden the concept of assessment beyond the traditional models of intervention and instructional support. New practices reflect a shift from traditional standardized assessments to more pragmatic, educationally relevant models focused on measuring changes in individual performance over time. Such challenges include the shift from a “within child” deficit paradigm to a contextual perspective with a greater emphasis on instructional intervention and progress monitoring prior to special education referral. General educators, reading coaches, administrative staff, Reading Intervention Specialists, and special educators experienced in working with struggling readers, such as the dyslexic student, must engage in new and expanded roles that incorporate prevention and identification of at-risk students. Their contribution to the school community can be viewed as expertise that is used through direct and indirect services to support struggling students, children with disabilities, the teachers and other educators who work with them, and their families.

The opportunities for Reading Intervention Specialists working within RTI frameworks are extensive. To some, these opportunities may seem overwhelming—how can we make time in an already full workday for so many new activities? If current expectations for traditional roles continue, it may not be reasonable to expect professionals to do even more. However, the point of RTI is not to add more tasks but to more effectively allocate time to address prevention and early intervention and provide special education services earlier in the process rather than waiting until students fail.

III. NEW AND EXPANDED ROLES

Reading Intervention Specialists offer expertise at many levels of RTI implementation, from system-wide program design through specific assessment and intervention efforts with the individual student. New and expanded roles of Reading Intervention Specialists within the RTI model may include:

- Helping to select, design, implement, and interpret whole school screening programs and dynamic assessments that provides early intervening services for all children considered to be “at risk” and to identify “false positives,” those not “at risk.”
- Helping to design instructional assessment models at all tier levels.
- Participating in the design and delivery of professional development that informs understanding of the structure of language and the differentiated strategies appropriate for each tier.
- Helping to monitor instructional effectiveness at all tier levels.
- Helping to design and implement a process for progress monitoring, data collection, and data analysis.
- Consulting with parents to foster carryover and reinforcement of skills in the home.
- Collaborating with general educators, school psychologists, occupational therapists, physical therapists, and other service providers in the implementation of RTI models.
- Consulting with content area teachers about their role in literacy development, such as the integration of strategies specific to phonics, morphology, vocabulary, and comprehension development into their classrooms.
- Supporting colleagues through mentoring and close collaboration to provide consistency in reinforcing skills.
- Increasing sensitivity regarding the emotional consequences of learning disabilities.

IV. MEETING THE CHALLENGE

Professionals working with struggling readers, including Reading Intervention Specialists, will be called on to take a proactive approach to sharing reading knowledge with other personnel and to work collaboratively. The RTI requirement to use scientifically-based reading research means all educators who teach reading need to be adept with phonemic awareness, phonics, morphology, comprehension, fluency, and vocabulary (among other skills) to support the remediation of each child's learning difficulties. Teamwork and professional development will prepare all professionals involved in the process to overcome the roadblocks to implementing RTI for reading instruction.

To meet this challenge, professionals who work with struggling readers, including the student with dyslexia, need to be:

- Open to changes in how students are identified for intervention; how interventions are selected, designed, and implemented; how student performance is measured and evaluated; how evaluations are conducted; and how decisions are made.
- Open to professional development in evidence-based intervention approaches, progress monitoring methods, evaluation of instructional and program outcomes, and contextually-based assessment procedures.
- Willing to adapt a systemic approach to serving schools, including a workload that reflects less traditional service delivery and more consultation and collaboration among professionals in general education classrooms.
- Willing and able to communicate their worth to administrators and policymakers and to educate others on the unique contributions that Reading Intervention Specialists can make consistent with the provisions of IDEA 2004.

IDEA 2004 does not mandate significant change or prohibit traditional practices. Rather, it encourages the adoption of new approaches that promise better student outcomes. Successful RTI-type programs rely on the leadership of a strong principal or designated leader who has budgetary power and the ability to bring special education, Title I, reading specialists, and general educators together to share professional development, time, space, money, and curricula resources.

IDA's members, including Reading Intervention Specialists, can begin the RTI process by sharing with principals and school leaders the benefits of an RTI-type approach and the support offered through IDEA. Innovations in education, such as RTI, offer numerous opportunities to enhance reading intervention services by identifying struggling learners early to improve their educational outcomes.

RESOURCES AND REFERENCES

Adapted from *Problem Solving and RTI: New Roles for School Psychologists*, by Andrea Canter, National Association of School Psychologists, *Communiqué*, 34, (5), insert, 2006. Available: www.nasponline.org

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National Association of State Directors of Special Education. *Response to Intervention: Policy Considerations and Implementation. Response to Intervention: NASDSE and CASE White Paper on RTI*. Available: www.nasdse.org

National Joint Committee on Learning Disabilities. *Responsiveness to Intervention and Learning Disabilities*. Available: www.ldonline.org/njclld

School Social Work Association of America. *Response to Intervention*. Available: www.sswaa.org



The Role of Reading Specialists in the RTI Process

RTI will allow struggling students to receive effective reading interventions early, rather than the to “wait-to-fail” model currently in practice. RTI is an effort to address the significant percentage of students — up to 40 percent, according to President’s Commission on Excellence in Special Education — whose reading problems place them in special education classes. Moreover, early reading failure is often a contributing factor in misbehavior that may lead to further special education referrals.

The Role of Reading Specialists in the RTI Process will be to fulfill a number of responsibilities, and many may have a specific focus that further defines their duties. For example, a reading specialist can serve as a teacher for students experiencing reading difficulties; as a literacy or reading coach; or as a supervisor or coordinator of reading/literacy. The reading specialist must be prepared to fulfill the duties of all three of these. It is expected that the reading specialist will meet the following qualifications:

- Previous teaching experience
- Master’s degree with concentration in reading education
- A minimum of 24 graduate credit hours in reading and language arts and related courses
- An additional 6-credit-hours of supervised practicum experience.

Challenges and Opportunities for Reading Specialists/Literacy Coaches

IDEA 2004 and its accompanying regulations present new challenges and opportunities for school personnel working with at-risk and special needs populations

RTI is a component of comprehensive assessment. Assessment, observation, and curriculum records generated by this early intervention process can be used in making learning-disabled designation decisions. But the RTI process does not necessarily lead to a learning disability designation. Rather, RTI is an effort to avoid an unnecessary learning disability designation by giving the student precise scientifically-based reading help much earlier in the game. The teacher’s documentation of intervention and progress monitoring is useful information for moving a child to the next appropriate level of help. Teams must conduct relevant, comprehensive evaluations using qualified personnel, which necessarily will include reading specialists/literacy coaches whose skills remain essential to the determination of a SLD, as well as to the determination of other disabilities. The legislation is explicit on this score: “The screening of a student by a teacher or specialist to determine appropriate instructional strategies for curriculum implementation shall not be considered to be an evaluation for eligibility for special education and related services.” (P.L. 108-446, section 614, 1, E.)

New Expanded Roles

RTI and Problem Solving increase the need for reading specialists/literacy coaches. The design, implementation, and evaluation of problem solving and RTI approaches create new opportunities and greater need for reading specialists/literacy coaches, while also requiring their active participation in more familiar—if expanded—assessment roles. Reading specialists working in districts that opt to develop problem solving and RTI procedures can offer tremendous value and expertise at many levels, from program design to professional development.

System Design

Reading specialists are among the best-trained professionals in the school district to help develop, implement, and evaluate new models of service delivery. These roles include:

- Providing professional development for teachers by offering them the additional support needed to effectively implement RTI (various instructional programs and practices).
- Identifying and analyzing existing literature on scientifically-based literacy assessment and instructional approaches.
- Developing, leading, and evaluating a school reading program, from kindergarten through grade 12.
- Identifying systemic patterns of student need (e.g., identifying persistent difficulties among kindergarten and first grade students in basis phonic skills) and working with district personnel to identify appropriate, evidence-based intervention strategies.

Collaboration

Reading specialists are often assigned to leadership roles on school teams. Even when not designated as a team leader, the Reading Specialist often is regarded as a leader regarding such issues as assessment and home-school collaboration. As members of the intervention assistance and special education teams, reading specialists play critical roles in the implementation of problem solving and RTI efforts, including:

- Serving as a resource in the area of reading for paraprofessionals, teachers, administrators, and the community.
- Working cooperatively and collaboratively with other professionals in planning programs to meet the needs of diverse populations of learners.
- Ongoing consultation regarding implementation issues as well as regarding individual student needs.
- Providing essential leadership for the school's entire literacy program by helping create and supervise a long-term staff development process that supports both the development and implementation of the literacy program over months and years.
- Working effectively as an administrator and being able to develop and lead effective professional development programs.

Serving Individual Students

Most Reading Specialists/Literacy coaches will be expected to alter their roles within problem solving and RTI models, these activities will likely include:

- Providing intensive instruction to struggling readers. Such instruction may be provided either within or outside the students' classrooms.
- Consulting with teachers and parents regarding early intervention activities in the classroom and at home.
- Demonstrating (and training) informal assessment as part of an individual student intervention plan, and assisting staff in interpreting data as part of the on-going decision-making process.
- Observing students in the instructional environment in order to help identify appropriate intervention strategies, to identify barriers to intervention, and to collect response to intervention data.

Meeting the Challenge

It is clear that whatever guidance comes out of the US ED, reading specialists will be called on to take a more proactive and flexible approach to sharing reading knowledge with other personnel and to working collaboratively to learn the insights and knowledge of other staff professionals. The RTI requirement to use scientifically based reading research means both beginning and seasoned general, special education, and reading specialists need to be adept with phonemics, phonics, comprehension, fluency and vocabulary (among other skills) to support the remediation of each child's learning difficulties.

Many schools have already developed sensible, effective intervention programs. Successful RTI-type programs rely on the leadership of a strong principal or designate leader who has budgetary power and the ability to bring special education, Title I, reading specialists and general educators to the same table to share professional development, children, time, space, money, and curriculum resources. The sharing of resources is sometimes a stumbling block yet strong designated school leaders are able to keep the focus on the children being helped and the pride the teaching profession can have on a job well done.

IRA members can begin the RTI process by sharing with principals the benefits of an RTI-type approach and the support offered through IDEA. The chief financial incentive is that 15 percent of a school's special education funds can be used to launch the RTI process. These efforts may include reading professional development for general education and special education personnel.

To meet this challenge, reading specialists/literacy coaches will need to be:

- Open to change — change in how students are identified for intervention; how interventions are selected, designed, and implemented; how student performance is measured and evaluated; how evaluations are conducted; and how decisions are made.
- A member of the observation team when the child's learning problems involve reading;
- Service providers in the RTI process;
- Sharing expertise with the other professionals on the team (i.e. special ed, social workers, Title I, general educators, and administrators).

- Willing to adapt a more systemic approach to serving schools, including a workload that reflects less traditional service delivery and more consultation and collaboration in general education classrooms.

IDEA '04 does not mandate significant change or prohibit traditional practices. Rather, it encourages the adoption of new approaches that promise better student outcomes. Such innovations in education offer numerous opportunities to enhance literacy instruction to the benefit of all students

Key Resources

Adapted from *Problem Solving and RTI: New Roles for School Psychologists*, by Andrea Canter, National Association of School Psychologists, *Communiqué*, 34, (5), insert, 2006. Available: www.nasponline.org

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The Role of Parents/Family in Responsiveness to Intervention

September 2006

IDEA 04 offers states and localities the option of using “a process that determines if the child responds to scientific, research-based intervention as part of the evaluation process...,” but it does not require that states or districts use Responsiveness-to-Intervention, often shortened to RTI. Although RTI is similar to the old pre-referral or problem-solving model first suggested by Dr. James Chalfant in the mid-70’s as Teacher Assistance Teams (TAT), parents have begun to hear a lot about RTI as a “new” way to help students with learning disabilities.

What is an RTI?

Although there is no single RTI model, the many variations that are emerging use a two- to five-tiered model in the primary grades. The goal is early intervention for students having difficulty learning, so that achievement is improved for all students. Each tier provides increasingly individualized instruction, continuous monitoring of progress, and criteria for changing intervention and/or tier through a team decision-making process. In general, three tiers would include:

- ◆ Tier 1 – high quality instruction and behavioral supports are provided in general education classrooms.
- ◆ Tier 2 – more specialized instruction in a smaller group is provided when a student’s progress and performance fall behind that of their classmates, schoolmates, or district.
- ◆ Tier 3 – more individualized intervention is provided by special education personnel if referral and evaluation for special education determines eligibility for services.

Why should parents get involved now?

As states (SEAs) and districts (LEAs) begin exploring whether an RTI approach will be used, and if so, what form it will take, decisions will be made that affect students with learning disabilities. Unless parents become involved in the decisions of states and localities by asking questions and demanding clear answers, those decisions will be made without parent input. These questions include: 1) what components of RTI will be used, 2) when and how will parents participate, 3) what instruction will be provided and by whom, 4) what criteria will determine changes for a student, 5) who will be on decision-making teams, and 6) when and how will SLD identification and eligibility be determined?

What components of RTI will your state/district implement?

While IDEA encourages the use of a process that documents how successfully a child responds to scientific, research-based interventions as part of the evaluation for SLD identification, there are many choices that SEAs and LEAs can make in developing an RTI approach. Some of the most commonly recognized components that should be part of any RTI process include:

- ◆ An early screening that is *universal*, or given to all children.

- ◆ Two to five stages or *tiers* that reflect instruction that increases in intensity, specialization and individualization.
- ◆ Requirements for *parent/family notification and involvement* when difficulties are initially noted and continuing until the student achieves age-appropriate academic progress or when evaluation for identification occurs.
- ◆ Scientific, *evidence-based* screening, instruction, monitoring and evaluation measures whenever possible.
- ◆ General and specialized *teachers* that can provide effective instruction needed by each child.
- ◆ Methods of regularly *monitoring student progress* that have been shown to be valid and reliable.
- ◆ A *team decision-making* process that includes parent participation and approval.
- ◆ Requirements that an *evaluation for identification/eligibility* include multiple measures.

The way in which these and additional components are implemented should not lead to delay in serving students or to the misidentification of students. Thus, an RTI intended to serve students with SLD should recognize that intra-individual differences are typical and difficulties may occur in language arts areas other than basic reading, in academic areas such as mathematics or science, and/or in organizational, social, and attentional skills. However, neither lack of age-expected progress in basic reading skills nor academic underachievement alone is sufficient to identify SLD.

When and how will parents participate?

Parents and families must be meaningfully involved in RTI development, *beginning with planning* and continuing as implementation occurs at SEA and LEA levels, including participation in the activities of federally mandated, state and local Special Education Advisory Panels. As an RTI approach is shaped, procedures must guarantee that parents/families will be *notified of and involved* when student difficulties are first noted, and continued as team-decisions; adjustments in instruction; changes in educational, related service, or support personnel occur; and evaluation for identification are initiated. Similarly, parents must ensure that schools are required to provide written information on a regular basis about their child's progress or lack of it. Families should not be expected to initiate requests for such information. Just as IDEA empowers parents to initiate an evaluation, provisions should be included that allow a parent to initiate an RTI team meeting to consider tier or instruction/intervention changes.

What instruction will be provided and by whom?

A crucial, but not unique, concern of RTI, is the *quality of instruction*. RTI broadens the focus of instructional effectiveness to include *both general and special educators*. As an RTI approach is developed, considering availability of resources will be important, but ensuring that teachers possess the needed instructional skills is also vital. More specifically, any RTI approach must make certain that:

- ◆ A range of instructional approaches and interventions are available to students.
- ◆ High quality general education instruction is supported by continuing professional development.
- ◆ High quality specialized intervention is supported by continuing professional development.
- ◆ The time, space, personnel and materials are available for short and long-term instruction.
- ◆ Supervision is provided to monitor the accuracy, or fidelity, of student instruction and intervention.

What criteria will determine changes for an individual student?

The availability of timely, purposeful, and data-driven changes to inform instruction, determine tier placement, and meet individual student needs are key concepts of RTI. As RTI approaches are developed, both *the intended and unintended consequences* need to be carefully reviewed so that:

- ◆ The measures used for progress monitoring are evidence-based, and shown to be valid and reliable.
- ◆ Responsibility for administration, recording, and regular review of monitoring data is clearly described.
- ◆ Decisions are made about whether student progress will be compared with classmates, schoolmates, or with other groups.
- ◆ Guidelines are in place to specify the length of time required or permitted in order to determine if instruction is effective.
- ◆ The criteria for change in tier level are clear and based on scientific evidence from similar populations.
- ◆ Guidelines for team consideration of objective, quantified data and/or subjective, professional judgment are in place.
- ◆ Timelines are established for calling a team meeting and implementing a change in instruction or in tier placement
- ◆ Guidelines for change to a tier providing either more intensive or less intensive instruction are in place.

Who will be on decision-making teams?

Decision-making teams should be *used in two different ways* within an RTI approach. First, continuous progress monitoring data that meets established criteria for academic difficulty should trigger a team meeting to recommend changes in instruction and movement among tiers. Second, continued difficulty or initiation of parent or professional request for evaluation (under IDEA) should trigger team meetings consistent with IDEA. In either case, at least one team member should have expertise in learning disabilities based on professionally accepted standards and/or competencies, which mild/moderate certification may not ensure. In addition, a parent should be a required and respected participant in both team processes. Guidelines for including a general education teacher and appropriate related and support service professionals are also important.

How and when will SLD identification and eligibility be determined?

Within any RTI process, a key component for non-responders is *the comprehensive evaluation* that determines SLD identification and eligibility for services. Just as the early stages or tiers of RTI can offer high quality instruction and participation in the general education curriculum, the comprehensive multi-disciplinary evaluation offers non-responders more intensive and individualized instruction designed to meet identified needs of the child. As an SEA or LEA explores possibilities for implementation of any RTI approach, it is important to address the need for:

- ◆ Written materials that inform parents of their right to request, at any time, a special education evaluation, as guaranteed under IDEA.
- ◆ A formal process that ensures parent awareness of their right to refer their child at any time.

- ◆ Procedures that guide team use of RTI data in the identification/eligibility process.
- ◆ Procedures that ensure a comprehensive evaluation including data beyond RTI data.
- ◆ The requirement that measures of intra-individual differences are part of the comprehensive evaluation.
- ◆ The requirement that data from measures of cognitive factors be available to exclude students with mental retardation.
- ◆ The requirement that data from measures of ability and academic achievement be available to address underachievement that is unexpected.

What will be the activities of the State Special Education Advisory Panels?

IDEA has long mandated that every state have a Special Education Advisory group, as well as comparable groups at the local level. However, IDEA now places *increased responsibility* on these groups which are established for the “purpose of advising State special education staff regarding the education of eligible children with disabilities,” including students with disabilities who have been incarcerated as adults. While a majority of the members must be individuals with disabilities or parents of children with disabilities, other members can be from many other areas. Panel meetings must have a prior public agenda and be open to the public. *Required activities* of the panels include commenting publicly on proposed rules and regulations and reviewing final due process findings. In addition, the Panel advises the state on unmet needs; needed corrective actions; service coordination; and data to be and reported. *Beyond these requirements*, parents/families can encourage states to expand their required Panel activities to include some of the following that impact special education at both the local and state levels.

- ◆ Assisting in establishing annual state priorities.
- ◆ Developing an annual report.
- ◆ Involvement in developing the State Performance Plan (SPP).
- ◆ Including public comment as part of the Panel agenda.
- ◆ Participation in development of the Annual Performance Report (APR).

Additional Resources

For more information on Responsiveness-to-Intervention, parents are encouraged to review and share the following materials available on the LDA website, www.LDAamerica.org

- LDA (March 8, 2006). *Information on Responsiveness to Intervention*. Pittsburgh, PA: Learning Disabilities Association of America.
- LDA (May 2006) *Responsiveness to Intervention: Questions Parents MUST Ask*. Pittsburgh, PA: Learning Disabilities Association of America.
- NJCLD (June 2005). *Responsiveness to Intervention and Learning Disabilities: A Report Prepared by the National Joint Committee on Learning Disabilities* (accessed at www.LDAamerica.org, May 2006).

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NATIONAL
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The Role of the School Psychologist in the RTI Process

The Responsiveness to Intervention (RTI) process is a multi-tiered approach to providing services and interventions to struggling learners at increasing levels of intensity. RTI can be used for making decisions about general, compensatory, and special education, creating a well-integrated and seamless system of instruction and intervention guided by child outcome data.

RTI calls for early identification of learning and behavioral needs, close collaboration among classroom teachers and special education personnel³ and parents, and a systemic commitment to locating and employing the necessary resources to ensure that students make progress in the general education curriculum. RTI is an initiative that takes place in the general education environment.

School personnel can play a number of important roles in using RTI to identify children with disabilities and provide needed instruction to struggling students. These roles will require some fundamental changes in the way general education and special education engage in assessment and intervention activities. Collaborative

roles vary with the settings and experiences of those involved. Parents also need to know how an RTI process may help their child and be informed that at any time that they may request a full evaluation to determine eligibility for special education.

RTI may include the following conditions and activities:

- High quality instructional and behavioral supports are in place.
- Scientific, research-based intervention is delivered by qualified personnel with expertise in the intervention used and in the areas of student difficulty.

Numerous national organizations have contributed their time to collaborative discussions and to the introduction to this document. However, this is not a “consensus” document and organizations have not endorsed the separate fact sheets or the job roles written by other organizations representing their own constituencies. The following organizations have participated in this process:

American Speech-Language-Hearing Association (ASHA)
Council of Administrators of Special Education (CASE)
Council for Exceptional Children (CEC)
Council for Learning Disabilities (CLD)
Division for Learning Disabilities (DLD)
International Dyslexia Association (IDA)
International Reading Association (IRA)
Learning Disabilities Association of America (LDA)
National Association of State Directors of Special Education (NASDSE)
National Association of School Psychologists (NASP)
National Center for Learning Disabilities (NCLD)
National Education Association (NEA)
School Social Work Association of America (SSWAA)

¹ These personnel include but are not limited to classroom teachers, school psychologists, reading specialists, school social workers, school counselors, occupational therapists, physical therapists, speech-language pathologists, audiologist, learning disabilities specialists, and other specialized instructional support personnel (related/pupil services personnel).

- Student progress is continuously monitored.
- Data-based documentation is maintained on each student.
- Systematic documentation verifies that interventions are implemented with fidelity, integrity, and the intended intensity.
- Decisions are made by a collaborative team of school staff who review response data and other information required to ensure a comprehensive evaluation.
- Interventions address the individual student's difficulties at the needed level of intensity and with the support of needed resources and personnel.
- A written document describing the specific components and structure of the process to be used is available to parents and professionals.
- Parent notification and involvement are documented.

As a school-wide prevention approach, RTI includes changing instruction for struggling students to help them improve academic skills and behavior. To meet the needs of all students, the educational system must use its collective resources to intervene early and provide appropriate interventions and supports to prevent learning and behavioral problems from becoming larger issues. To support these efforts, the Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004) gives more financial flexibility to local education agencies (LEAs). Under the Early Intervening Services (EIS) provisions in the law, to help minimize over identification and unnecessary referrals, LEAs can use up to 15% of their federal IDEA funds to provide academic and behavioral services to support prevention and early identification for struggling learners [P.L. 108-446, §613(f) (1)]. LEAs also have greater flexibility to use up to 50% of any increases that they receive in federal funding for Title I activities. These funds may be used for professional development of non-special education staff as well as for RTI-related activities.

Students who are not achieving when given high quality instruction may have a disability. RTI may be used as part of a process to identify students with specific learning disabilities rather than relying on the use of a discrepancy model as a means of identification. This approach was authorized in IDEA 2004 in the following provision:

- (c) local education agencies (LEAs) may use a student's response to scientifically-based instruction as part of the evaluation process; and (b) when identifying a disability, LEAs shall not be required to take into consideration whether a child has a severe discrepancy between achievement and intellectual ability [P.L. 108-446, §614(b)(6)(A)].

The purpose of this fact sheet is to identify the key roles that school psychologists can undertake when an LEA or school decides to adopt an RTI model. The reader is referred to the additional fact sheets written by the organizations listed on page one that discuss the roles of parents and other school personnel who participate in RTI procedures.

Challenges and Opportunities of RTI

The design, implementation, and evaluation of RTI approaches create new opportunities and greater need for school psychologists, while also requiring their active participation in familiar, if expanded, roles. School psychologists' training in consultation, academic and behavioral

interventions, counseling, research, and evaluation results in a broad range of skills that will be needed as districts implement new RTI procedures.

There are, of course, challenges to school psychologists working in districts that undertake the shift from traditional psychometric (norm-referenced) approaches to a more pragmatic, RTI approach (focused on measuring changes in *individual* performance over time). Such challenges include the shift from a “within child” deficit paradigm to an eco-behavioral perspective; a greater emphasis on instructional intervention and progress monitoring prior to special education referral; an expansion of the school psychologist’s assessment “tool kit” to include more instructionally relevant, ecologically based procedures; and possibly the need for additional training in all of the above.

New and Expanded Roles

School psychologists working in districts that opt to develop RTI procedures can offer tremendous value and expertise at many levels, from system-wide program design through specific assessment and intervention efforts with the individual student.

System Design

School psychologists are among the best-trained professionals in the school district to help develop, implement, and evaluate new models of service delivery. These roles include:

- Identifying and analyzing existing literature on problem solving and RTI in order to determine relevant and effective approaches for the local district (or state).
- Working with administration to identify important stakeholders and key leaders to facilitate system change (obtain “buy-in”).
- Conducting needs assessments to identify potential obstacles, concerns, and initial training needs.
- Designing evidence-based models that best fit local needs and resources.
- Planning for and conducting necessary staff training for implementation (e.g., training in evidence-based instructional interventions, evaluating student progress).
- Developing local norms for academic achievement (e.g., curriculum-based measures and other measures of student progress) and monitoring the reliability and validity of these norms over time.
- Implementing and evaluating pilot projects.
- Overseeing district level implementation and ongoing evaluation.
- Engaging in ongoing communication and consultation with administration, school board, teachers, and parents.

- Identifying systemic patterns of student need (e.g., persistent difficulties among kindergarten and first grade students in basic phonics skills) and working with district personnel to identify appropriate, evidence-based intervention strategies.

Team Collaboration

School psychologists are often assigned to leadership roles on school teams. Even when not designated as a team leader, the school psychologist is often regarded as a leader pertaining to issues such as assessment, mental health, home-school collaboration, and school-agency collaboration. As members of the intervention assistance and special education teams, school psychologists play critical roles in the implementation of RTI efforts, including:

- Engaging in ongoing consultation regarding implementation issues as well as individual student needs.
- Collaborating in the development of team procedures (e.g., developing procedures for referral, monitoring and evaluation at each tier; developing specific procedures for measuring response to intervention; developing observation and interview protocols, etc.).
- Identifying team training needs and providing, or helping the team obtain, relevant training (including training in applying progress monitoring procedures to decision-making).
- Serving as liaisons to parents by helping them understand the new model and how it impacts their child, thus, helping to ensure that parent input is integrated into each tier of intervention and subsequent evaluation.
- Serving as liaisons to community providers and agencies who may not be familiar with the new models by conducting inservice training about the models to community providers, thus, ensuring appropriate involvement and communication with community providers (with parent consent).
- Providing oversight of progress monitoring and integration of all data in team decision-making.

Serving Individual Students

Most school psychologists will continue to spend the majority of their time addressing individual student problems. Within RTI models, these activities will likely include:

- Consulting with teachers and parents regarding early intervention activities in the classroom and at home. Because RTI approaches emphasize early intervention (Tier 1), school psychologists may spend more time and effort at this stage than they did under traditional models.
- Demonstrating (and training) progress monitoring strategies as part of the individual student intervention plan, and assisting staff in interpreting data as part of the ongoing decision-making process.

- Observing students in the instructional environment in order to help identify appropriate intervention strategies, to identify barriers to intervention, and to collect response to intervention data.
- Evaluating the student’s cognitive functioning. As always, the school psychologist plays a key role in the comprehensive evaluation. When students are referred for consideration of a Specific Learning Disability (SLD) or other disability categories, it is essential that the team gathers information about cognitive functioning. Depending on the rules and criteria used in a particular state and district, information regarding cognitive ability might include observations of the student during instruction, historical review of the student’s academic progress and health history, interviews with parents and teachers, review of data reflecting the student’s response to intervention, standardized measures of cognitive ability (such as intelligence tests), and/or direct measures of specific cognitive processes related to specific academic skills. Using multiple sources of data to address the student’s cognitive functioning not only reflects best practices, but also minimizes the impact of biases and limitations of standardized norm-referenced IQ measures, especially for children who are from diverse racial, cultural, linguistic, or economic backgrounds.
- Determining the most useful procedures to address referral concerns and the needs of the individual student. School psychologists may spend less time in formal assessment activities by individualizing the assessment based on student need rather than complying with “gatekeeping” rules.
- Evaluating the student’s relevant academic, behavioral, and mental health functioning. As part of a comprehensive evaluation, the school psychologist should always consider relevant academic, behavioral, and mental health concerns that may impact school performance. This role is no different under RTI models than under traditional models. If behavioral or mental health issues are not easily ruled out in considering academic difficulties, the school psychologist should work with other team members to obtain appropriate, useful data using empirically supported procedures. (More time might be available to address mental health issues under new models.)
- Working with team members and service providers to set realistic goals, design appropriate instructional strategies and progress monitoring procedures, and periodically evaluate student progress for those receiving special education services, using RTI and other data.

Meeting the Challenge

The opportunities for school psychologists working within RTI frameworks are extensive. To some these opportunities may seem overwhelming—where in the workday would there be time to *add* all of these activities to our current responsibilities? Certainly, if the traditional roles of assessment-for-classification continue, it would be difficult to expand into these new roles. The point of RTI, however, is not to add more tasks but to reallocate school psychologists’ time to better address prevention and early intervention, and in the long run serve more students up front rather than at the point of special education evaluation and service. Where RTI models have been

faithfully implemented, this seems to be the outcome—school psychologists spending more time on services within general education and less time on eligibility assessment activities, leaving more time available to address mental health issues. Some districts report reductions in special education referral and placement; even where placement rates have remained stable, school psychologists nevertheless report a change in the way they spend their time. The reallocation of effort will hopefully lead to more effective interventions, both for students who remain in general education and those who ultimately qualify for more intensive services. The emphasis on problem solving efforts and early intervention within the general education setting also holds promise for reducing the disproportionate representation of students from culturally and linguistically diverse backgrounds in special education.

To meet this challenge, school psychologists will need to be:

- Open to changing how students are identified for intervention; how interventions are selected, designed, and implemented; how student performance is measured and evaluated; how evaluations are conducted; and how decisions are made.
- Open to improving skills (as needed) in evidence-based intervention strategies, progress monitoring methods, designing problem-solving models, evaluating instructional and program outcomes, and conducting ecological assessment procedures.
- Willing to adapt a more individualized approach to serving students while also adapting a more systemic approach to serving schools.
- Willing and able to communicate their worth to administrators and policymakers—to “sell” new roles consistent with the provisions of IDEA 2004.

RTI approaches are an innovative example of new techniques in education that offer numerous opportunities to enhance the practice of school psychology to the benefit of all students.

References and Resources

Note to reader: This fact sheet has been adapted from *Problem Solving and RTI: New Roles for School Psychologists*, by Andrea Canter, National Association of School Psychologists, *Communiqué*, 34, (5), insert, 2006. Available: www.nasponline.org

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Response to Intervention

For the millions of children who struggle with learning, The Individuals with Disabilities Education Act (IDEA) holds great promise for providing them with the early recognition and evidence-based instruction they need to succeed in school. The new law allows schools to use a research-based, multi-tiered problem-solving approach known as Response to Intervention (RTI) as a vehicle to helping all students who struggle with learning. It holds particular promise for students with learning disabilities as it calls for early identification of learning needs, close collaboration among general and special education personnel and parents, and a systemic commitment to locating and employing the necessary resources to ensure that students have access to and make progress in the general education curriculum

RTI is a clear (and increasingly popular) alternative to the IQ-discrepancy model which, for the past three decades, had been the underlying special education model through which students received evaluation and treatment services. Unfortunately, this latter approach resulted in schools waiting until students demonstrated significant and prolonged periods of failure before taking formal action to address their learning and behavioral needs.

RTI has application for general education, compensatory education, and special education. Most importantly, RTI promotes research-based instruction and quality teaching that result in better outcomes for all students.

One of the advantages of RTI is the timely identification of children who struggle with learning. While RTI is not intended as a stand-alone approach to determining specific learning disabilities, it can be a key component of a comprehensive approach to disability determination. In an RTI model, if a student does not respond to robust high-quality instruction and intervention that is progress monitored over time, he or she may indeed be determined to have a learning disability. The benefit of RTI for these at-risk students is that it provides a wealth of meaningful instructional data that can be used in creating well-targeted individualized instructional programs and evidence-based instructional interventions. In addition RTI sets in place a student progress monitoring process that facilitates communication and promotes ongoing meaningful dialogue between home and school.

Challenges and Opportunities

The challenges associated with implementing a fully realized RTI system will vary according to current practices at individual schools and school districts. In fact several schools have been using problem-solving approaches to instruction for many years under names like Teacher Assistance Team Model, Pre-Referral Intervention Model, Instructional Support Team Model, School-Based Consultation Team Model, Problem-Solving Model and others. For these schools, refining current systems, if needed, will be a natural evolution in their methods and practices.

Other schools that have more research-based approaches to instruction will be able to build on strong reading programs that have sprung out of the No Child Left Behind movement. For example, Reading First schools have programs with similar characteristics to RTI — universal screening, researched-based instruction for all students, tiered, research-based interventions for struggling learners, continuous progress monitoring, and use of data on student performance to guide decisions about instruction and intervention.

It is critical that schools provide the technological systems that help them manage data. Today, there are many inexpensive, easy-to-use systems available to schools. Some states and school districts have developed their own data collection system. Among other things, each school's RTI model will need to be well-documented to assure the fidelity of practice and RTI must be seamlessly integrated into school-wide practice.

Opportunities are present within an RTI process to further study and understand how to better identify and serve students as well as learn more about the environment that supports successful RTI implementation. Questions that require and deserve more research and attention are:

- How do we assure adequate resources are in place to ensure general education is providing effective instruction? (NCLD, 2004)
- What can a successful model do to better identify students with learning disabilities who are also gifted? (NJCLD, 2005)
- How do we adequately train and support school personnel (Vaughn & Fuchs, 2003)
- How many students will be identified as non-responders (Hale et al., 2004)
- What 'conditions' exist for success and how do we recreate and maintain that — especially in large, urban schools? (Deshler, 2006)
- Are parents and others prepared for the non-categorical approach to special education service delivery that RTI will likely deliver? (Fuchs et al., 2003)
- What are the implications for referrals and subsequent eligibility decisions for minority students? (NCLD, 2006)
- What are the implications for the existing definition of Specific Learning Disability (SLD)? (NCLD, 2006)

IDEA allows 15 percent of special education funds to be used to provide early intervening services for students who have academic or behavioral difficulties but are not identified as having learning disabilities. A district that has been identified as having significant disproportionality in identifying students for special education is required to provide early intervening services. This new provision is a huge breakthrough for students at risk of having learning disabilities. They now are eligible to receive early intervention services as early as kindergarten and first grade instead of waiting until they experience a prolonged and significant period of academic failure, often as late as third or fourth grade, which is often the case under the IQ-achievement discrepancy model.

RTI offers other benefits as well. It:

- Helps ensure that a student's poor academic performance is not due to poor instruction
- Promotes improved instruction through the use of multiple assessments and progress monitoring
- Provides instructionally relevant data and emphasizes effective teaching approaches rather than eligibility for special education classification
- Reduces the likelihood of children incorrectly classified as having specific learning disabilities because of poverty-related learning difficulties or cultural and/or language differences
- Decreases the number of students inappropriately referred for special education assessment and intervention.

New and Expanded Roles

In order for RTI to work effectively, schools need to create building-based teams consisting of general and special education teachers as well as other school professionals, such as school psychologists, speech-language pathologists, and reading specialists. These problem-solving, building-based teams are critical in planning interventions for students that provide the kinds of instruction and methodologies struggling learners need to succeed. Involving parents and communicating with them in this collaborative team approach is critical in the successful implementation of RTI.

The general RTI model begins with a tiered approach to quality research-based instruction that is effective for at least 80 percent of students. It then uses general education *and* special teachers to provide research-based interventions and differentiated instruction to those students who are performing below expected levels of achievement. The RTI approach to intervention requires teachers and specialists to sit down as a team to analyze data and design a customized plan for each student who is struggling to learn. It provides opportunities for professionals to learn from one another and to take that learning into the whole class, small group, and individualized instruction.

Parent engagement is a key component of a strong RTI model. Actively involving parents contributes greatly to student outcomes. Parents should be engaged in all aspects of RTI, but most assuredly in areas that involve the provision of early intervening services. First and foremost, parents will need to be familiarized with the RTI process, so that they can provide effective home support for their children and know that they will be kept apprised of their child's progress. Parents should also have input and access to written intervention plans that include details about how the school is planning to help their child. Failure to communicate and reach out to parents will lead to confusion, especially among parents who believe their children have a learning disability. Schools may also want to provide other means for keeping parents engaged and informed, such as:

- Involving them in state and local planning for RTI adoption
- Providing them written material informing parents of their right to refer their child at any time for special education evaluation as stipulated in IDEA 2004

- Providing written material that outlines the criteria for determining eligibility under IDEA 2004 and the role of RTI data in making LD determinations

Taking measures to build strong productive relationships with parents can only increase the likelihood that students will benefit greatly from a RTI model.

Meeting the Challenges

RTI works hand in hand with other delivery service models. It does require, however, a greater sharing of professional talent, a commitment to earlier recognition of students who struggle, and a willingness to deliver relevant, high quality instruction and support before referring students for special education testing. As with any reform effort or best practice, RTI demands the presence of strong leadership including administrative leadership from the central office down to school sites. Strong leadership, from the top down and from the bottom up, provides the support needed to sustain implementation and build capacity of the initiative.

The RTI approach to tiered interventions provides educators and school leaders a means to engage in meaningful conversation and problem-solving around things such as, but not limited to:

- How strong is the current general education curriculum and whether it is meeting the needs of at least 80% of students
- How existing resources can best be reallocated to support a RTI model
- How much time should be devoted to individual, small group or whole class instruction
- How teachers will learn about and gain proficiency in the use of research-based instruction teaching tools and methodologies
- How much ongoing professional development and teacher support is needed to ensure that students make and sustain progress
- How parents can best be engaged in the decision making process for their children
- How exactly student progress will be assessed (i.e. mastery of skills, rate of learning) and monitored over time

In addition, adequate professional development must be provided to all professionals on the RTI team. To be effective training must include ongoing consultation and feedback.

Parents must also be prepared to discuss the following questions as well as any others that may seem appropriate with their school:

- Is the school district currently using an RTI process to provide additional support to struggling students? If not, do they plan to?
- What universal screening procedures are used to identify students in need of intervention?
- What are the interventions and instructional programs being used? What research supports their effectiveness?
- What process is used to determine the intervention that will be provided?

- What length of time is allowed for an intervention before determining if the student is making adequate progress?
- What strategy is being used to monitor student progress? What are the types of data that will be collected and how will student progress be conveyed to parents?
- Is a written intervention plan provided to parents as part of the RTI process?
- Is the teacher or other person responsible for providing the interventions trained in using them?
- When and how will information about a student's performance and progress be provided?
- At what point in the RTI process are students who are suspected of having a learning disability referred for formal evaluation?

Response to Intervention cannot be fully realized in a quick-fix environment. It is a systematic problem-solving approach that requires fundamental changes for most schools, while holding out the promise of better outcomes for all students. It puts into practice everything we know about good instruction. For more information about RTI, visit www.ld.org/rti

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The Role of General Education Teachers in the RtI Process

The Responsiveness to Intervention (RtI) process is the practice of providing high quality instruction and interventions matched to student skill needs, monitoring student progress frequently to make changes in instruction or goals, and applying child response data to important educational decisions. RtI focuses on early identification of learning and behavioral needs and the provision of appropriate evidence-based interventions in order to address skill gaps early to keep them from becoming larger issues.

RtI is a school-wide prevention approach, the foundation of which is quality core instruction within the general education classroom. Supplementary supports and services, academic and behavioral interventions, are provided to struggling students based on data collection and analysis. These supplementary supports and services vary in intensity based on student need, and may be provided by a variety of personnel, including general education teachers.

Briefly stated, RtI is a systematic process of intervention to prevent school failure.

Challenges and Opportunities of RTI

NEA believes that general education teachers have a key role in the provision of needed instruction to students who are struggling academically and/or behaviorally. As schools, districts, and states create and implement RtI processes/models, educators will have the opportunity to be involved in a process that supports the learning of all students by identifying and responding to student academic and behavioral needs with more emphasis on prevention through early intervention, rather than adhering to the traditional “wait to fail” model. RtI opens up more opportunities for collaboration with other members of the education team and brings timely and relevant supports into classrooms.

The general education teacher has a crucial role in ensuring that the RtI process is implemented with integrity. Academic and/or behavioral data collected and analyzed throughout the RtI process may demonstrate a pattern of inadequate response to high quality interventions for some students. These data may indicate a need to refer students for additional assessment and consideration for special education services. Rather than relying solely on the use of a traditional discrepancy model in making eligibility decisions for special education services, student academic and/or behavioral data may be used as part of a process to identify students with specific learning disabilities.

There are, of course, challenges for educators working in districts that shift from the traditional approach to an RtI approach of early intervening. Such challenges include ensuring that RtI processes and procedures are not an “add on,” but a meaningful transformation of a traditional system, and that educator workload is adjusted to facilitate and support the positive and appropriate implementation of the process.

New and Expanded Roles

General education teachers in districts developing and implementing RTI processes and procedures can provide support in many ways from designing the local model, to participating in effective implementation, to serving on program evaluation committees to measure the effectiveness of the process. New and expanded roles for general educators include participation in systems design, quality professional development opportunities, team collaboration, as well as learning and implementing new strategies to serve small groups and individual students.

System Design

General education teachers bring to the planning process a depth of understanding of how students learn as well as deep content knowledge. Coupled with the genuine desire to facilitate learning for all and each student, general education teachers can take on key roles in designing the local RtI process. These roles include:

- Identifying and analyzing existing literature on problem solving and RtI in order to determine a relevant and effective approach for the local district;
- Actively identifying and addressing systemic barriers to learning;
- Identifying, implementing, documenting, and analyzing evidence-based academic interventions;
- Identifying, implementing, documenting, and analyzing evidence-based behavioral interventions;
- Identifying technology needs and reviewing technology programs to reduce increased paperwork expectations;
- Engaging in ongoing communication and consultation with administration, school board members, related service providers, and parents; and
- Identifying professional development topics and issues of importance to the process.

Professional Development

General education teachers implement a wide variety of instructional strategies and conduct ongoing assessment of student progress as a part of their practice. With an emphasis on early intervening for the purpose of prevention of school failure, teachers will be challenged to examine current practices, hone existing skills, and learn new knowledge and skills to ensure high quality instruction for each student. Teachers will have opportunities to participate in focused quality professional development relating to RtI processes, procedures, and practices. Key issues to be addressed for teachers include:

- Differentiating instruction for a diverse classroom,
- Ongoing curriculum-based data collection and analysis,
- Evidence-based intervention strategies for both academics and behaviors,
- Progress monitoring processes and procedures,
- Problem-solving methods to facilitate data-based instructional decision-making, and
- Professional collaboration skills.

Team Collaboration

As the primary provider of instructional services, general educators are crucial members of school teams, often assuming leadership roles. As members of the general education intervention teams and special education individual education program teams, general educators play critical roles in decision-making and implementation of instruction. Professional collaboration has been and will continue to be important as schools implement RtI. General educators will:

- Engage in ongoing collaboration to address small group and individual student needs;
- Collaborate with other school personnel in data collection and analysis;
- Collaborate with parents by helping them understand the new model and how it impacts their children, and ensure that parent input is integrated into each tier of intervention and subsequent evaluation;
- Identify professional growth opportunities.

Serving Small Groups and Individual Students

General education teachers will continue to provide the best possible education for all students via whole group, small group, and individual instruction, as needed. To ensure that appropriate evidence-based strategies are selected and implemented for each student, general educators will engage in activities that will include:

- Consulting with other professionals and parents regarding early intervention activities in the classroom and at home;
- Applying progress monitoring strategies as part of the student intervention plan;
- Collecting data within the instructional environment in order to help identify appropriate intervention strategies, to identify barriers to intervention, and to collect response to intervention data;
- Referring students for consideration of a Specific Learning Disability (SLD) or other disability when a pattern of inadequate response to instruction and interventions is demonstrated by the student; and
- Working collaboratively with other team members and service providers to set realistic goals, design appropriate instructional strategies and progress monitoring procedures, and periodically evaluate student progress for those receiving special education services, using RTI and other data.

Meeting the Challenge

The opportunities to affect student learning and outcomes provide compelling rationale for general educators to rise to the challenge of transforming traditional wait to fail practices to an RtI early intervening process. To meet this challenge and to ensure success of the local RtI process/model, general education teachers are encouraged to:

- Reflect on current practices and ensure that high quality evidence-based instructional strategies are central to daily teaching and learning;
- Participate in professional development opportunities related to new processes, procedures, and practices;
- Translate and transfer new knowledge and skills into classroom practice that results in better outcomes for students;

- Access support from others who also serve the academic and behavioral needs of students, such as
 - Reading specialists,
 - School psychologists,
 - School counselors and school social workers,
 - Title I staff,
 - Special education staff,
 - Speech-Language Pathologists, and
 - Parents and families;
- Expect leadership and resource support from building and district administrators, as well as from local policymakers, to facilitate the reduction of paperwork and create times for team collaboration; and
- Ensure that elements subject to collective bargaining are addressed appropriately.

Intervening for students who are struggling academically and/or behaviorally are what general educators have been doing for as long as public education has been in existence. With the appropriate implementation of RtI processes and models at the local level, the opportunities to improve upon the science, art and craft of teaching are before us.

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Response to Intervention: New Roles for School Social Workers

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Introduction

Response to Intervention (RTI) is the practice of providing high quality instruction and evidence-based interventions to address student needs. Educators and other school personnel use learning rate over time and the student's level of performance to make educational decisions that will assist in the student achieving success. By employing student screening, diagnostics, and continual progress monitoring to inform instruction, decisions about general, compensatory, and special education are more accurate and defensible.

Emanating from the reauthorization of IDEA and identification criteria of Specific Learning Disability, RTI is encouraged as a system wide approach in general education to prevent and/or resolve lack of student success. Using this multi-tiered problem-solving approach allows for early identification of struggling students and offers increasingly intensive interventions for specific groups of students rather than waiting for students to fail.

In a typical three-tiered model the first tier, universal intervention services, are interventions applied to all students in an effort to improve competencies and build capacity. These interventions help to promote academic achievement, student mental health, and positive school climate. The second tier, targeted intervention services, uses those strategies that seek to prevent and intervene in problems that are impeding smaller groups of students at risk. The third tier, intensive intervention services, targets individuals and small groups of students who require intensive support in order to succeed in school academically, socially, emotionally, and behaviorally.

Challenges and Opportunities of the New Model

There is confusion among some educators regarding how the elimination of the IQ/discrepancy criterion requirement will impact the assessment process. The changes in the IDEA 2004 statute support the ecological and systemic models that are the foundation of school social work

