

## Response to Intervention and IDEA - LD Identification in the RTI Instruction Model

February 28, 2008 1:00 PM - 2:00 PM

### **About this Talk**

Featured experts **Dr. Mary Beth Klotz** and **Dr. Daryl Mellard** will answer questions from parents and teachers about legislative requirements and best practices on how RTI can ensure accurate and timely LD identification.

### **Transcript**

**Q** **Lauri Lewitas**

I am a resource room teacher for K-2 students. Unfortunately, I am the only resource room teacher in my K-2 elementary school building. How can I utilize an RTI model most efficiently with my struggling students?

**A** **Mary Beth Klotz**

One of the key ingredients in an RTI approach is collaboration. Many schools have a limited number of specialists in the building and find themselves in a similar predicament such as you describe. One helpful technique is "resource mapping." This is where the entire staff takes a look at the expertise and experience they bring to the process. For example, a particular teacher may have dual certification in elementary and special education; another person may have taken recent coursework in reading; someone else may speak a second language fluently and have experience living in another country; etc. With a team approach, the expertise of the staff can be considered "resources" in the problem solving process and in providing interventions for struggling students. In addition, school teams have looked at flexible scheduling options within the school day to again maximize the contributions of various staff members.

For an example of a staff resource mapping form, see [Montgomery County Maryland Public Schools](#). Through their Collaborative Action Process they have developed a "Staff Asset Map" and a "Staff Asset Survey."

**A** **Daryl Mellard Ph.D.**

Lauri, The answer is not so simple, but will certainly be influenced by the staff's attitude. RTI is about efforts in the whole school, not one teacher or administrator. Also, no one model of RTI exists. We see many different implementations which take advantage of the available resources and the context of the school, district, and community. We have numerous resource materials to assist you such as the NRCLD resource kit that includes research briefs, documents for parents, materials for presentations and two manuals of interest to you: Getting Started and then RTI: How to do it These materials are available for FREE at [http://nrclid.org/resource\\_kit/index.html](http://nrclid.org/resource_kit/index.html) As I suggested in other

**A** responses, the issues are less about more resources or the technologies. Successful RTI implementation depends on the staff's willingness to see themselves engaged in different roles and interacting differently. Other staff will likely have other responsibilities as part of the RTI implementation.

**Q** **Kendra Wagner**

I have a measurement question about Dibels or any other CBM used for progress monitoring - what level of improvement defines "progress" -- for fluency, speed and accuracy? What if there is uneven progress such as their speed increases but their accuracy gets worse? These are kids NOT identified as Special Ed. but are up for evaluation as such. Thanks.

**A** **Daryl Mellard Ph.D.**

Kendra,

As you likely know, assessing a student's responsiveness is not just an issue with CBM measures. Folks who will use a pretest-posttest model also have to address your question. regardless, the answer is not simple but we can suggest several considerations.

1. You want to ensure that the measures are reliable. Theodore Christ's work (U. of MN) has addressed the reliability issue in a way that should caution us.
2. I like that you are considering both speed and accuracy measures. In the example you cited of speed increases but accuracy decreases, we know that a curricular change is needed. At least two options seem worth considering: reduce the task difficulty to focus on a smaller set of items and instruct specifically on the errors. For guidance on setting cut scores for level and slope, I suggest that you review several materials at the Student Progress Monitoring Web site.

I know that Lynn and Doug Fuchs' 2006 presentation at the Summer Institute addressed your question directly. In 2007, Pam Stecker and Erica Lembe had an institute presentation "[Advanced Applications of CBM in Reading \(K-6\)](#)" that also covered this topic. The web site also recently posted an on-line tutorial that would be very informative.

**Q** **Karen Maguire**

Where does the diagnosis and remediation of dyslexia fall in the IDEA and RTI guidelines. Isn't dyslexia listed in federal guidelines as a learning disability?

**A** **Mary Beth Klotz**

The term ?dyslexia? is included in the definition of a specific learning disability in IDEA 2004. See Sec. 602 (30) (B) of the statute; and Sec. 300.8 (c) (10) of the Part B Regulations. You will not find dyslexia mentioned in the section of the law that addresses the identification of specific learning disabilities, although this is where the use of a process based on the child?s response to scientific,

- A** research-based intervention (RTI) is outlined. The law and regulations are searchable on the [U.S. Department of Education's IDEA Web site](#).

If a child is found eligible for special education and related services based on a learning disability (such a reading disability or dyslexia), the Individual Education Program (IEP) Team and the parents would determine what supports and services the student would need in order to improve their achievement and work toward meeting grade level standards.

**Q** ***Zoe Mahoney***

I teach students in elementary school with LD. I use supplemental intervention programs with my students and see myself as already doing Tier 2 and Tier 3 type intervention. My question pertains to when students don't respond to these interventions and will then be considered for possible placement in an LD program. Then what? If I am already using supplemental intervention programs, what am I to change about how I serve students once they do qualify for LD? Can you shed some light on what our roles will be under an RTI model once a student DOES qualify for an LD program?

**A** ***Daryl Mellard Ph.D.***

Zoe, The general answer is that your Tier 2 and Tier 3 interventions should inform the multi-disciplinary team about the kind and, particularly, the intensity of interventions that will be needed for this student to make progress. Your interventions are the test for the need for such intense services and to satisfy one component of SLD determination. I doubt that your role would change. I imagine though that you might be using the most intense interventions available to support students. Intensity might also be influenced by the size of the instructional grouping, the frequency with which the intervention is delivered, the duration of the intervention. At our NRCLD website, Don Compton's presentation at the April 2006 SEA conference addressed how special education might look in an RTI framework.

**Q** ***Cheryl White-Lindsey***

How has the RTI initiative affected students from culturally diverse backgrounds and has there been statistical analysis recorded on the effects of RTI on this population in particular?

**A** ***Daryl Mellard Ph.D.***

Cheryl, The work is emerging about RTI applications as you describe. The National Center for Culturally Responsive Education Systems (<http://www.nccrest.org/>) is preparing professional development modules specifically on this topic. I don't know of statistical analysis relevant to your question. I would very hesitant to make generalizations from the individual school cases that we studied.

**A** ***Mary Beth Klotz***

**A** There is great promise that the RTI initiative will reduce the number of students from culturally and linguistically diverse backgrounds receiving special education services. Numerous RTI advocates and researchers have recommended the use of RTI strategies to help close achievements gaps between diverse groups of students. In the 2002 report, "Minority Students in Special and Gifted Education," the National Research Council recommended using RTI techniques to improve achievement and behavior and to help reduce the disproportionate representation of minority students in special education. The U.S. Department of Education also supports the use of RTI strategies in an effort to improve the achievement of all students. IDEA 2004 includes a provision for Early Intervening Services (EIS) that allows school districts to spend up to 15 percent of their federal special education funds on academic and behavioral supports for at-risk general education students. This use of these funds is discretionary, except for those districts that have significant overrepresentation of students from culturally and linguistically diverse backgrounds receiving special education services. This policy underscores the belief that struggling students should receive support and interventions in a timely and effective manner within the general education setting before being considered for special education eligibility. References and Resources National Research Council (2002) *Minority Students in Special and Gifted Education*. Committee on Minority Representation in Special Education, M. Suzanne Donovan and Christopher T. Cross, editors. Division of Behavior and Social Sciences and Education. Washington, D.C: National Academy Press. From the National Education Association (NEA) and National Association of School Psychologists (NASP), "Truth in Labeling: Disproportionality in Special Education" Download from the NEA website at [www.nea.org/specialed/images/truthinlabeling.pdf](http://www.nea.org/specialed/images/truthinlabeling.pdf).

**Q** **Karolyn Renard**  
If a student's learning disabilities aren't identified until junior high or high school and he/she is already far behind grade level, is it ethical for a school district to insist on trying RTI before providing the one-to-one intensive compensatory education the student clearly needs to catch up?

**A** **Daryl Mellard Ph.D.**  
Karolyn,

I don't have a good answer about the ethics for a school district. One of the difficulties that a school district confronts is that we don't have a strong research base on RTI in junior and high schools. So a broader question perhaps is whether RTI is appropriate for such settings? My hunch is that the core principles about RTI which include delivering high quality interventions with fidelity and assessing students' responses to those interventions does make sense.

The models of RTI that I've seen are pretty fluid in terms of student movement. That means, we should be able to match a student's instructional and curricular needs to the intensity of the service. Accurate screening and progress monitoring data will be important to making those matches. We shouldn't have to expect a student to move through a series of tiers in a lock step sequence. As we gain more experience in a local school with the interventions that work with which children and under which conditions, we should be able to make more accurately, timely links to

**A** the services. The downside of the "fluid" movement of students is that we saw numerous examples in our study of elementary school implementations, when the rules for student movement didn't match the practice. The rules for judging responsiveness and non-responsiveness were applied very loosely. Hence, movement was very fluid. I don't think that's a good idea (to be loose with the rules).

**Q** **Rama Mishra**

Is RTI the appropriate method to identify LD as compared to discrepancy approach, curriculum-based or other methods?

**A** **Daryl Mellard Ph.D.**

Rama,

Unresponsiveness in an RTI framework is not the sole basis for judging SLD. At its best RTI tells us that a student has not responded to scientifically based interventions that have proven to be generally effective for most children.

No one component is sufficient for making any diagnostic determination. In many instances, schools are not totally eliminating the use of a discrepancy approach in SLD determination. One reason is that schools don't have RTI models implemented beyond elementary schools. In addition, we have not experimentally compared the results of RTI and other approaches.

The jury is still out about how RTI will work as a necessary component of SLD determination. We can point to studies that document the value of an RTI framework for addressing the academic and behavioral needs of primary school age children judged as at-risk for difficulties, especially in reading. That is a tremendous value for many, many children who otherwise would have a poor prognosis for learning and performance. Perry Zirkel and Nico Krohn in *Teaching Exceptional Children* (January, 2008) reviewed a survey of states' practices regarding RTI and other SLD assessment models.

**Q** **Ed Flynn**

How will RTI affect identification of children with Learning Disabilities and what if your county has not embraced RTI as a model?

**A** **Mary Beth Klotz**

The use of RTI will allow struggling students to receive help in a more timely fashion than in a discrepancy model that often requires the student to "wait to fail" before a referral for special education eligibility is made and specialized interventions take place. Elements of an RTI approach may be in place in a school district that has not formally embraced the approach. For example,

- A** IDEA 2004 requires that to be considered for special education services based on a learning disability, a child must have been provided with appropriate instruction and their progress monitored through “data-based documentation of repeated assessments of achievement at reasonable intervals.” In addition, parents must be provided with the results of the student progress monitoring.

Even if a school district is not utilizing RTI, they may still take advantage of the early intervening services provision (EIS) outlined in IDEA 2004. This provision allows a local education agency to utilize up to 15% of their federal special education funds to provide early intervening services to general education students who need additional academic and behavioral supports to succeed in the general education setting.

Readers may find additional information on SLD identification and the RTI-related provisions in IDEA 2004 on the [Website of the National Research Center on Learning Disabilities](#); and on the [U.S. Department of Education, Office of Special Education’s IDEA Web site](#).

- A** ***Daryl Mellard Ph.D.***  
Ed,

My hope is that with a rigorous implementation of RTI, we can identify students with SLD earlier in their educational experience so that they receive high quality services earlier. Another big benefit is that with a well-developed intervention system we will be able to match interventions better with learners and have the data to judge their effectiveness. We will all likely get better at using students' assessed responsiveness to informing our decisions of what's working and what's not. Central to this implementation is having a school based team that expects, requires accurate student data and follows the rules for decision-making. If that happens, we should be able to rule out poor instruction as a hypothesis for a student's difficulties.

I was frequently bothered by the structures in schools that would allow poor teaching to be excused as a "student's problem." We would focus on the student, when the instructional and curricular choices for the class as a whole were poor ones. RTI is going to be a big challenge for schools and staffs that are not prepared to use screening and progress monitoring data to make hard decisions about resources, professional development, and staffing. If your county or school hasn't embraced RTI, progress will be slower. The biggest challenges for implementation are not technological. The biggest challenges will be the necessitated changes in staff's perceived changes in their roles related to attitudes, norms of behavior, and expectations. The challenge will come in how they have to change in their working together.

RTI doesn't get implemented by a teacher or a building principal. Everyone has to be on the bus and realize that how they plan, engage with one another, and support students will likely change. If you want to get started, start with whatever is easiest in the school. Maybe that's administering and using universal screening. Maybe start with progress monitoring and using the results to judge how well students, classes, grade levels are performing. The continuing fundamental question is:

**A** What would improve learners' outcomes and how will we judge our success?

**Q** **Brad Hale**

How do you address the IDEA SLD statutory requirements (i.e., deficit in the basic psychological processes), and the requirement for assessment in all areas of suspected disability using RtI data? If it cannot be addressed using RtI, what data do you recommend to address this need? Thanks.

**A** **Daryl Mellard Ph.D.**

Brad,

The requirements as I read them indicate that we need to ensure a comprehensive evaluation, but that the specific assessments are not specified. Hopefully, we can look to OSEP to provide additional guidance as our research continues.

We are clear that when RTI is implemented with rigor and high quality the results can rule out inadequate instruction as a basis for the student's difficulties. RTI is one component of a comprehensive evaluation. What should the rest of the evaluation consider? My preference is to test alternative considerations (hypotheses) to explain the achievement difficulties. We have a substantial amount of literature about comorbidity and the specificity of SLD (e.g., Berninger, Swanson, Wood, Catts). SLD includes such a broad range of specific disabilities, that no one assessment is likely to be valid across the ages and manifestations. So, what should be considered in the evaluation plan? No one battery is sufficient. Let's ensure though that we are using instruments with demonstrated reliability sufficient to represent the student's performance and accurate enough to yield a score that is clearly interpretable.

Your question also prompts me to remind us that we haven't tested RTI against other models of SLD determination, especially among older students. Hopefully we can continue investigations along those lines.

**Q** **Brad Hale**

How does one determine response or nonresponse for moving through tiers, and determining SLD?

**A** **Daryl Mellard Ph.D.**

Brad,

Judging responsiveness is an important topic to RTI implementation. In a review of alternative methods, a dual discrepancy approach had more support than alternatives.

You can read up on that research in a couple of sources: Fuchs, D., Fuchs, L.S., & Compton, D.L.

**A** (2004). Identifying reading disabilities by responsiveness-to-instruction: specifying measures and criteria. *Learning Disabilities Quarterly*, 27, 216-227.

At our NRCLD Web site, you might want to investigate a paper titled: "Topical Forum 1: Applying Response-to-Intervention (RTI) to Specific Learning Disability (SLD) Determination Decisions: Research Findings."

Another issue besides the method of how to calculate responsiveness is setting an cutoff for level or rate that would indicate adequate and inadequate responsiveness. I hope we are all in agreement that we need a frame of reference that is larger than the learner's classroom. I'm inclined to favor a state-level norm to help address concerns about consistency and equity.

**Q** **Barb Weiss**

What will Rtl look like at the secondary level?

**A** **Mary Beth Klotz**

Implementation of RTI at the middle and high school levels is still a relatively new process in most school districts. Most of the extensive body of research addressing RTI has been conducted in elementary school settings. Although the nature of secondary schools requires that RTI processes differ in structure from those programs being implemented at the elementary level, the core components of RTI would still apply. These components include:

- High-quality core curriculum, research-based instruction and behavioral support available to all students;
- Universal (school-wide) screening to identify students at risk for difficulty;
- Multiple tiers of scientific, research-based interventions matched to student need and of increasing intensity;
- Continuous student progress monitoring during the interventions to evaluate their effectiveness and make adjustments as needed;
- Fidelity of treatment implementation to be sure that interventions are being implemented as designed;
- Data-based decision making.

The [National Association of School Psychologists \(NASP\)](#) has published several articles that address RTI in secondary schools and provide examples from schools such as East Central School District in Minnesota. Administrators from East Central were concerned with the potential number of students who would not pass the math test required for high school graduation. As a result, they implemented a RTI program that included universal screening of students in grade 8 to determine which students were in need of intervention. Those students received supplemental math instruction; use of evidenced-based instructional strategies; use of behavior management and motivational techniques; regular student progress monitoring; and small-group instruction.



- A** Although not all students achieved grade level competency in the first year, they made on average twice the growth typically seen in grade 8, and greatly improved their rate of growth compared with their scores from the previous year (Windram, Scierka, & Silbergitt, 2007).

Read more about RTI in secondary settings in the following articles from NASP:

- [?Response to intervention at the Secondary level: Two districts? models of implementation.?](#)
- [?Response to Intervention: The Future for Secondary Schools.?](#)
- Readers will want to download the transcript from the October 2007 LD Talk entitled, [?RTI Gets Promoted to Secondary Schools.?](#)

Be sure to review the PowerPoint and presentation notes from the December 2007 RTI Summit Presentation by Don Deshler and Joe Kovalski entitled, "[Secondary Applications of RTI: a Guided Discussion.](#)"

**A** **Daryl Mellard Ph.D.**

Barb, We can speculate that some differences are expected. For example, we would not likely be screening to predict the students with reading difficulties, but we might screen to predict who is most at risk to drop out. I'm suggesting two presentations for your review about middle school and secondary level RTI that can be found at <http://nrclid.org/about/presentations/> Donald D. Deshler and Joseph F. Kovalski Secondary Applications of RTI: a Guided Discussion (ppt). Notes from Presentation (pdf). Charlie Hughes and Don Deshler RTI in Middle and High School: How Will the Game Play Out? (pdf)

**Q** **Barb Weiss**

How will re-evaluations be done under Rtl?

**A** **Daryl Mellard Ph.D.**

Barb,

I assume you mean in terms of the reevaluation of students with disabilities and I don't know how RTI will play into re-evaluations. In our study of elementary school implementation, that issue didn't present itself probably because folks had not been implementing their RTI procedures long enough. I imagine that you will have some good ideas on the topic!

Wouldn't one of the central questions though focus on the sufficiency of the student's level and rate of responsiveness? We're not interested in determining eligibility for special education but rather ensuring adequate progress.

Other assessments would then be completed and added to the intervention data so that we could test alternative hypotheses about the limitations on the student's learning and performance.

**Q David Hansen**

How can districts who are barely meeting their budgets now and who have zero dollars in their professional development budgets, afford to shoulder the costs associated with initiating RTI?

**A Mary Beth Klotz**

The U.S. Department of Education has funded a number of special centers in recent years that provide excellent sources for high quality, research-based professional development materials and information on RTI. In addition, these professional development tools and resources are available to states and districts free of charge via the websites of the centers and projects.

To highlight professional development materials from a few of these centers, I would suggest the following links:

- [National Research Center on Learning Disabilities \(NRCLD\)](#)  
The NRCLD engages in research, develops recommendations, and provides professional development training.
- [The LD Resource Kit:](#)  
SLD Determination Procedures and RTI includes information on how to do RTI, tools for change, an RTI manual, PowerPoint presentations, and parent handouts.
- [The IDEA Partnership](#)  
The IDEA Partnership has developed an extensive set of RTI professional development materials which can be accessed through their website.
- [The RTI Collection](#)  
The RTI Collection includes grounding assumptions and guiding principles on RTI; glossary of terms; PowerPoint Presentations with Presenter's Guides; Dialogue Guides; and a compendium of RTI references and resources.
- [The National Center on Response to Intervention](#)  
The National Center on Response to Intervention provides technical assistance to states and school districts to implement RTI programs. In addition, the Center disseminates information to parents, service providers, policymakers and others; and offers expert RTI trainings (both face-to-face and at a distance).

Readers are also encouraged to watch for the launch of the RTI Action Network's Web site in April. This project is sponsored by the National Center for Learning Disabilities and funded by the Cisco Foundation and will offer a wide array of professional development tools and resources.

**Q Michael A. Parker**

If the team determines that there is not a discrepancy between the child's cognitive ability and the educational scores to qualify for special education, can the team decide to qualify the student

**Q** based on the documentation that there has been no response to the interventions? In other words, can the teacher's daily documentation and observation be taken into consideration when reviewing the results of the evaluation?

**A** **Daryl Mellard Ph.D.**

Michael, The student's lack of response to intervention is insufficient to determine that a student has a SLD. The lack of response is important information and should be considered but other explanations could account for the difficulty, not just SLD.

**Q** **Andrea Chipeco**

While we have a good number of assessments to universally screen and monitor language arts, we have not been as successful with finding these for math. Can you suggest anything?

**A** **Mary Beth Klotz**

The [National Center on Student Progress Monitoring](#) has established a standard process to evaluate the scientific rigor of commercially available tools to monitor a student's progress.

The tools chart on their website summarizes the results of the review and includes several math progress monitoring tools that have met the standards for reliability, validity, and progress monitoring. See this [Progress Monitoring Standards chart](#) on the National Center on Student Progress Monitoring Web site.

**A** **Daryl Mellard Ph.D.**

Andrea,

The research is emerging about mathematics.

- See "[The Prevention and Identification of Math Disability Using RTI](#)" (pdf) by Lynn Fuchs.
- Also, Russell Gersten made a presentation at NASP 2007 (New York) regarding math. Also, for locating interventions in mathematics, you might review the work at <http://www.bestevidence.org/index.cfm>.

**Q** **George Lauritson**

Has there been any formats for documenting the interventions done at the teacher, building or district level?

**A** **Mary Beth Klotz**

There are a number of sources you could turn to in order to review sample forms for documenting interventions done at the teacher, building or district level. As way of example, Montgomery County Maryland Public Schools has developed a number of forms to support their RTI model known as the Collaborative Action Process (CAP).

**A** The [CAP forms for individual students](#) include a student profile form and an activity log that help teams organize their documentation regarding interventions attempted and outcomes. The [National Center on Student Progress Monitoring](#) which has been funded by the Office of Special Education Programs (OSEP) offers helpful information and resources related to your question. Be sure to see the [review of progress monitoring tools](#).

**A** **Daryl Mellard Ph.D.**

George, That's a great question, but I don't have much of an answer. The examples I've seen in elementary schools were variable. They usually incorporated a graph of progress monitoring results.

**Q** **Ralph Allen**

Isn't the provision that parents can request a "comprehensive evaluation" in conflict with the RTI requirement that we demonstrate interventions over time? This allows parents to short-circuit the process!

**A** **Mary Beth Klotz**

Your question speaks to a number of issues. The first issue is the importance of having good communication and collaboration with families. For RTI approaches to be successful they must be implemented in a collaborative fashion with families being informed and involved in the process. As part of effectively laying the groundwork for RTI, school teams must provide information that summarizes the purpose and components of RTI in a parent-friendly manner. They must also ensure that the perspective of families is represented on RTI planning committees and implementation teams. Finally, school leaders should invest time in this critical consensus-building process by offering activities such as focus groups or Dialogue Guide Discussions (see references and resources that follow). When families understand the purpose and benefits of RTI and their input is obtained in the planning and implementation of new programs, they will be more likely to see that their child is receiving the support and early interventions needed for success. This will reduce the likelihood that parents (or school personnel for that matter) will want to prematurely initiate a referral for a special education evaluation.

Secondly, it is important to clarify the provision within IDEA 2004 that gives parents or the school district the right to request an evaluation to determine if a student is a child with a disability in need of special education. If a parent makes the request for an evaluation, the district must provide the parents with a copy of the Procedural Safeguards. The district must consider the parent's request and any pertinent background information. The district must then either accept the request and proceed in getting informed consent, or reject the request. If they reject the request they must provide the parent with written notice of their decision. Parents can then choose to challenge this rejection through due process procedures (for more information see references that follow).

#### **References and Resources:**

- A**
- Klotz, M.B., & Canter, A. (May, 2006). [Response To Intervention \(RTI\): A Primer for Parents](#), National Center for Learning Disabilities.
  - [A Parent's Guide to Response-to-Intervention](#), National Center for Learning Disabilities.
  - [IDEA Parent Guide](#). See pages 17 to 19 on a referral for an evaluation.
  - IDEA Partnership [www.ideapartnership.org](http://www.ideapartnership.org).
  - Click here to view the [RTI Dialogue Guides](#) on the IDEA Partnership site.

**A** **Daryl Mellard Ph.D.**  
Ralph,

Parents can short-circuit the process and I can imagine some reasons that educators might want to short-circuit the process (e.g., students judged as having internal emotional difficulties that could threaten their own safety).

The anecdotal information we have is that referrals by parents do decrease because the prime motive of educators and parents seems to be "helping the learner" and a well implemented RTI model will demonstrate through the progress monitoring results that the student is getting help and responding.

**Q** **Mike Norman**

What sure-fire methods or possibly research do you have to change the mindset of those that firmly believe that children can only be assessed using standardized measures?

**A** **Daryl Mellard Ph.D.**  
Mike,

Let's assume that those persons with the mindset you described might be persuaded to even consider a different point of view. My hunch is also that even those who rely on standardized, normative instruments also rely on some non-standardized, non-normative methods for informing decisions e.g., parental and student interviews, classroom observations, and work products. Thus, RTI could be a contributor of important information.

One of the intriguing qualities of RTI is that we can see it as a very rigorous dynamic assessment. Many persons would see that dynamic assessment as very valuable as opposed to our more static assessments of a learner at one point in time. At the same time, if we are going to use RTI as a "standardized" test we have to ensure that the implementation quality is very high, which was certainly a significant issue in earlier procedures such as pre-referral interventions or teacher-assistance teams.

In December of 2003, the NRCLD hosted a forum of researchers to address six questions about RTI. The questions are below. In addressing these questions, the researchers also addressed the central point of your question about how assessing a student's responsiveness to a scientifically-based

**A** intervention can improve the learner's performance and our understanding of the learner.

The panelists in the 6th session also addressed how RTI can be integrated into a broader assessment. RTI is not sufficient for making a disability determination and thus other assessments are needed.

- Session 1: How should screening for secondary intervention occur?
- Session 2: How should secondary intervention be formulated?
- Session 3: What are the feasibility and consequences of RTI?
- Session 4: How should "unresponsiveness" to secondary intervention be operationalized in an RTI approach to LD identification?
- Session 5: How many tiers are needed within RTI to achieve acceptable prevention outcomes and to achieve acceptable patterns of LD identification?
- Session 6: Panel: What are alternative models to LD identification other than RTI?

I don't know if that information provides a sure-fire method or sufficient research, but I'd start with this information and then listen carefully for the values (expressed or implied) in the response.

**Q** **Amy Shockley**

My school is going to begin implementing RTI next school year. In introducing this to staff, a teacher asked, "Won't this take more staff than we have to provide the interventions?" I didn't provide a good enough answer and I'm new to RTI myself. With such major budget cuts, I want to give that teacher a satisfactory answer. Thanks for your help.

**A** **Daryl Mellard Ph.D.**

Amy,

RTI didn't come with more money. More resources might be linked with developing Early Intervening Services as provided in the IDEA regulations. That provision essentially says that districts can use up to 15% of their special education service dollars to support academic and behavior interventions for students who are at-risk and demonstrating difficulties.

In the 60 elementary schools that we studied regarding their RTI implementation, we didn't hear much discussion of new dollars or staff. Rather they generally were reconfiguring how they used their existing resources:

- Instructional staff;
- Instructional time (schedules);
- Curricular materials and,
- Related services staff.

- A** One example is that staff were reoriented so that they all saw themselves as literacy instructors. They all took a role in ensuring high quality reading instruction.

The schedule was changed to ensure that reading development was very focused on core reading components for 90+ minutes/day. (Tier 1) Small group instruction for those students needing assistance needs to be provided by a person very skilled in delivering that intervention, not a volunteer who is available.

At [NRCLD.org](http://NRCLD.org), we have video interviews of school staffs who have addressed these related issues. We hope that those videos provide a useful frame of reference for staffs to become familiar with RTI. My suggestion is that the staff review the [video on the site on the selected topics](#).

The Web site also has other documents available: "Getting Started" is a document that might help with orienting staff.

- Q** **mark saalfield**  
How long has this program been in existence?

- A** **Daryl Mellard Ph.D.**  
Mark, RTI as we are implementing it today for SLD determination is fairly recent, but the critical components of RTI including screening, progress monitoring, tiered levels of increasingly intense services, and fidelity of implementation measures have been around for some time. Bender and Shores (2007) suggest that research on these RTI components can be traced to the 1960s.

- Q** **Susan J. Gustavson**  
Regular education personnel are the first responders when children experience learning problems. Please address the fact that education personnel receive little to no training in SLD, how it manifests itself, or methods that address the needs of these children. Is it not critical that this be addressed immediately since RTI is now a part of SLD identification? Much thanks.

- A** **Daryl Mellard Ph.D.**  
You are so right! Increasing general educators knowledge of SLD manifestations is important. My hunch is that if we can increase their knowledge and skills regarding high quality curriculum and instructional practices, all students will be well served. We have to support their professional development to ensure that they are knowledgeable about how to use their scientifically-based curricula and that they have the supports available so that the curriculum can be implemented consistently and accurately.

- Q** **Lisa Olson**

**Q** What are some exemplary RTI models that we can aspire to? In my district we have yet to implement RTI to its fullest extent, and I am wondering where we can look for the best practices for RTI? Thank you.

**A** **Daryl Mellard Ph.D.**

We have several school districts' staffs addressing RTI topics that might be important for you to hear. You can see short video interviews at <http://nrclid.org/topics/howto.html#3> One other important point is that all of the schools with whom we have worked indicated that "we are not there yet." They all feel like they have further work to do. Below is a list of 10 sites that have given us permission to release their names and contact information. 1. We don't feel comfortable that they are following NRCLD recommendations for RTI. Recall this list reflects practices that we considered to be among the best, but not that they met a criterion of agreed upon excellence. They are better than the norm of practice that we reviewed. They also have a longer history with implementation. 2. These sites are closest to using RTI in an EIS framework as opposed to either prevention or SLD determination.

RTI Component, ELEMENTARY SCHOOL, LOCATION: city/state, CONTACT INFORMATION

Screening and Parent involvement Jefferson Pella, IA Building administrator Brian Miller  
pcjebgm@pella.k12.ia.us 641-628-8267

Progress monitoring Cornell Des Moines, IA Building administrator Deb Chiodo  
chiodo@saydel.k12.ia.us 515-244-8173

Tier 2 reading intervention Rosewood Vero Beach, FL District level staff; CBM specialist Roberta Donelson  
bobbie.donelson@indian-river.k12.fl.us 722-564-3252

Tier 2 interventions Northstar Knoxville IA Building administrator Linda Dittmer  
dittmli@knoxville.k12.ia.us 641-842-6527

Tier 3 reading intervention Trailblazer Colorado Springs, CO Building administrator Katherine (Kathy) Tapia-Griego griegkd@d11.org 719-260-6820

Progress monitoring and professional development Fairfield Fairfield, OH Building administrator Leslie Laney Laney\_l@fairfield-city.k12.oh.us 513-829-3078

Progress monitoring & Data-based decision making Blue Ball East Earl PA Building administrator Linda Hitchcock linda\_hitchcock@elanco.k12.pa.us 717-354-1525

Progress monitoring and data-based decision making Wilcox Springfield, IL Special education case manager Vicki Peterman vpeterma@springfield.k12.il.us 217-525-3363

Tier 1 reading and data-based decision-making Columbia Heights Longview, WA Building



**A** administrator Patrick Kelley pkelle@kalama.com 360-575-7461

Progress monitoring & Fidelity Fairview Carroll, IA Building administrator Terri Miller  
tmiller@carroll.k12.ia.us 712-792-8030

**Q** **Pupil Personnel Team**

How does one determine the amount of time an intervention should last before a special education referral is made?

**A** **Daryl Mellard Ph.D.**

We don't have a specific guideline because so many variables need to be considered. I have seen some RTI models in which students completed two group interventions (the first of which was 4 to 6 wks) and then an individually designed intervention. The group interventions were using a standard treatment protocol and have a variable time frame. Thus, a student had three interventions before a referral was considered. We know that some students don't seem to respond until they've had 60 to 100 hours of intervention so the amount of time (which we think of as "learning opportunities") is one index of the intensity of an intervention. I push for schools to use standard treatment protocols for their interventions, especially at Tier 2, and those interventions are going to vary in length. If your team wants to increase an intervention intensity, increase the frequency with which the intervention is provided. The conflict becomes managing the student's schedule with other classes. On the other hand, if your model is to use RTI as a "test" of under-achievement, you could get by with one intervention. Just be certain that the intervention is matched appropriately and implemented with integrity.

**Q** **Jane VArga**

I am a school psychologist working in various Catholic Schools in different districts. How can RTI be in place in private schools? We don't have as many resources for interventions requiring additional programs. How do I continue to determine LD without a strong intervention base?

**A** **Daryl Mellard Ph.D.**

Jane, I could suggest praying but you might not consider that appropriate. From my days in Catholic school though, I did get a lot of practice. My suggestion is to start with our Getting Started manual available in our [NRLCD resource kit](#). A tool in the kit is a series of checklists for each of the six sections that might help guide the implementation and scaling up of an RTI framework. If school staffs are willing to reconsider their roles and responsibilities, RTI might be helpful. Again, RTI is one component of SLD determination. Further assessment will be needed.

**Q** **Kate**

Do assessments for progress monitoring need to be the same as the screening assessment that was used? Does the progress monitoring tool need to be norm referenced?

**A** **Daryl Mellard Ph.D.**

Kate,

Opinions seem to differ on answers to your questions. We want to know what the plan was for constructing the measures. For example a test of mastery is going to be different than a screening measure. We set up screening measures to identify who is at risk for difficulty, thus we are making a prediction. With progress monitoring, we are asking whether or not the student is responding to the current intervention (curricular, instructional or behavioral).

For progress monitoring I especially want to ensure that the test content matches the focus of the instruction. So issues of curricular and instructional validity are very important. If I don't assess progress on the content being taught, I wouldn't show progress! Both instruments need to have some normative reference point for judging at-risk status and progress.

A school and district would be well served to have a database of student performance on screening and progress monitoring test scores. Such test scores would provide an empirical basis for responding to your question and also help guide decisions about cutoff scores for screening and progress monitoring.

**Q** **Bonnie Mangan**

Who conducts the evaluations for LD? Is there state-by-state data summarizing this information?

**A** **Mary Beth Klotz**

IDEA 2004 set out a broad description of the evaluation team. The group that makes the determination of Specific Learning Disability (SLD) eligibility (which, technically is not synonymous with the IEP Team) must include, in addition to the child's parents and a teacher as defined in the Part B Regulations (Sec. 300.308(a), "at least one person qualified to conduct individual diagnostic examination of children, such as a school psychologist, speech-language pathologist or remedial reading teacher."

The Office of Special Education Programs (OSEP) did not require that school psychologists, speech-language pathologists, or other specific support services personnel (e.g., reading teachers, social workers, educational therapists) always be part of the school team, leaving this to be decided at the local level so that the composition of the group may vary depending on the factors involved in a particular case and the staff available in a given district. Each state must adopt their own criteria for SLD identification consistent with the federal regulations. Some states may choose to add more specificity to the required group members on the team that conducts SLD evaluations, however most typically the specific team member requirements would be established at the school district level. NASP has published a recent article on deciphering the SLD regulations that provides a complete analysis of the SLD identification provisions. See link below.

**A** To answer your second question, I am not aware of any study that summarizes state-by-state data on who performs LD evaluations, particularly since not all states have yet adopted their special education regulations. This type of data may be gathered at a future date by one of the federal technical assistance centers.

**Reference:** Lichtenstein, R. & Klotz, M.B. (November, 2007). [Deciphering the Federal Regulations on Identifying Children With Specific Learning Disabilities](#). *Communiqué*, Vol. 36, #3.

**A** **Daryl Mellard Ph.D.**

Bonnie, The SLD evaluations need to be conducted by a multi-disciplinary team. The Federal regulations provide guidance on that point. I don't know of a summary of current practice. At our NRCLD website you can locate a resource kit regarding RTI that would include references to the regulations. The website is [http://nrclid.org/resource\\_kit/index.html](http://nrclid.org/resource_kit/index.html).

**Q** **Katy Turnbull**

Can you suggest intervention programs for writing?

**A** **Daryl Mellard Ph.D.**

Katy, I don't have a quick reference for you, but suggest that you look to the research by Karen Harris and Steve Graham. Surely, the What's Work Clearinghouse will have information.

**Q** **Sabrina Faircloth**

What is the best literature you have found on the topic RTI?

**A** **Daryl Mellard Ph.D.**

Sabrina, The RTI literature is quite variable and broad so I don't know of any particular literature. The new RTI Technical Assistance Center will have a comprehensive listing very soon. Their website: <http://www.rti4success.org/>. I imagine you could Google RTI and see what looks most relevant to your interest. Of course I could suggest that you read my book, but I'm not into self-promotion!

**Q** **Teresa Hicks**

Is there a Federal mandate for implementing RTI as the basis for LD eligibility in all locations? What is the mandate?

**A** **Mary Beth Klotz**

The federal law permits, but does not require states and school districts to utilize RTI as a component of SLD identification. Furthermore, states may not require districts to utilize an IQ/Achievement Discrepancy Model. From IDEA 2004, P.L. 108-446, Section 614(b)(6): "when determining whether a child has a specific learning disability," the local education agency shall not

**A** be required to take into consideration whether the 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. "In determining whether a child has a specific learning disability, a local education agency may use a process which determines if the child responds to scientific, research-based intervention as a part of the evaluation procedures." Visit the [OSEP's IDEA website](#) to search the law and regulations, and find IDEA Topic Briefs, video clips, PowerPoint Presentations, Dialogue Guides, and Q & A documents.

**Q** **Patricia Walters**  
How does RTI affect the special education population? Does it become larger? Or does this model decrease due to the interventions that the classroom teachers implement?

**A** **Daryl Mellard Ph.D.**  
Patricia, Well, we have only some anecdotal information on disability prevalence because we could hardly say that we have broad RTI implementation. Some states are just beginning to form their advisory committees on how they will proceed. In one of the elementary school sites studies by the NRCLD, the disability and SLD counts increased over their five years of implementation because they were now determining SLD in the primary grades and previously, the disability determination wasn't made until 4th grade (in general). Another important piece of information was that the number of students judged as at-risk in grades 1, 2, and 3, and 5 decreased in reading and mathematics. This decrease in % continued across 5 years so that as the RTI model became more integral to the schools (10 elementary schools; half of which were Title 1), the positive outcomes increased. We are especially interested in studying middle school implementations, so if you know of a middle school with implementation, we'd like to chat further.

Laura Kaloi:

We also know in Long Beach, CA -- a large urban school district -- that they have maintained about a 7% identification rate for special education over about 10 years. CA's state identification rate is 10%. VanderHeyden also has data to support a reduction in referrals and identification to special education in the schools she studied.

That concludes our LD Talk for today. Thanks to everyone for the thoughtful questions and thanks to our experts, Drs. Mary Beth Klotz and Daryl Mellard for their time today.

I would like to invite each of you to help NCLD become your go-to place on the Web for information and resources on learning disabilities. Here's how:

[Become a FRIEND](#) of the National Center for Learning Disabilities to receive valuable benefits and join our

[legislative action network.](#)

## **Additional Resources on RTI**

### **[LD News Response to Intervention Archive](#)**

Every month in [LD News](#), NCLD highlights the latest news, research and practices in Response to Intervention.

### **[Response to Intervention section in NCLD's Infozone](#)**

NCLD has compiled a robust listing of RTI information and support materials housed on the NCLD Web site, as well as other leading organizations.

### **[A Parent's Guide to Response to Intervention](#)**

The Individuals with Disabilities Education Act (IDEA) includes a new provision that allows states and school districts to use high quality, research-based instruction in general and special education to provide services and interventions to students who struggle with learning and may be at risk, or suspected of having, learning disabilities. This NCLD guide offers an overview of the RTI process, describes how it is implemented in schools, and offer questions that parents can ask their children's schools.

### **[LD Talk Transcript: Reading and Response to Intervention \(RTI\): How Students Benefit from Multi-Tiered Instruction and Intervention](#)**

This April 2007 LD Talk featured experts Drs. Sharon Vaughn and Jeanne Wanzek, who answered questions about features of evidence-based reading instruction, the delivery of effective supplemental services, the importance of collecting and using data to inform instruction, as well as offering valuable information about the implementation of Response to Intervention (RTI).