Speech-Language Pathologists and RTI

May 12, 2011 1:00 PM - 2:00 PM

About this Talk

Join Drs. Barbara Ehren and Maureen Staskowski during our next RTI Talk as they answer your questions about the role of SLPs in RTI. They will also offer tips and examples of effective ways to engage in assessment and intervention activities based on lessons learned working with SLPs in local schools.

Transcript

Q Beth Barnes
Is RTI meant for speech and language also in the preschool setting?

A Maureen Staskowski, Ph.D.
A great resource for direction and examples of RTI in preschool with a collaborative teacher-SLP team is in the Pre-K section of the RTI Action Network. There is a link to a document and webinar entitled, "Read the Roadmap to Pre-K RTI: Applying Response to Intervention in Preschool Settings"

A Barbara J. Ehren, Ed.D.
Yes. See Froma Roth's work, among others.

Q Edna
What role does an SLP play on an RTI team?

A Maureen Staskowski, Ph.D.
There have been 2 journals in speech and language with an issue devoted to the roles of SLPs in RTI:
Topics in Language Disorders edited by Barb Ehren (Volume 25 #2, 2005 ) and Seminars in Speech Pathology edited by Froma Roth (Volume 20 #2, 2009 ). Combined these issues include 10 great articles about SLPs in various roles related to RTI.

RTI is a framework where key elements occur, yet it looks differently in each school or district depending on the culture, combination of staff, expertise of staff, and preference of the staff. Professionals from different disciplines may serve in the various roles. I have seen SLPs serve in different roles depending on their expertise, comfort level, preferences and directives.

SLPs as organizers/designers/leaders

Some SLPs have played a leading role in helping their district get started in developing a Multi-tiered System of Supports (MTSS). They may have helped their building and/or district select
universal screening measures, build infrastructure (who will do what and when) school-wide, or designate and structure team time or grade level meeting time. These SLPs often work closely with a leadership team to help develop these key elements.

**SLPs as data interpreters**
SLPs have incredible training in assessment, data analysis, designing instructional changes in response to discrete changes in data. Any team is fortunate when an SLP can attend data meetings. We bring a perspective and raise questions that may not be observed by other team members in the same way.

**SLPs as intervention providers or consultants to intervention providers**
SLPs have amazing intervention skills in language and literacy. RTI has provided a vehicle for many SLPs to shine ? to use their expertise in ways that helped the entire school or district and enabled principals and teachers to finally understand their expertise. It has also provided a vehicle for SLPs to move into a more inclusive and relevant service delivery model. There simply isn?t time to see students on caseload in isolation and consult with teachers and provide help to students at-risk for disabilities. For some SLPs, RTI has taken the debate out of service delivery. The result is that everyone involved sees the benefits of having the SLP and teachers collaborate closely.

**Lisa Duffy**
How are others identifying Language-Based Learning Disabilities within an RTI model? How have others utilized speech pathologists within the tiered RTI framework?

**Barbara J. Ehren, Ed.D.**
Indeed, students experiencing language difficulties who may turn out to be students with LLD would be identified through an RTI process in the same manner as other students. More to the point ?how many students with LD don?t have language issues? Very few. This construct relates to my plea for having SLPs as integral members of RTI teams to ferret out who needs what with respect to language. For me SLP roles revolve around:

1. **Triaging students**
   - Looking at students individually
   - Deciphering patterns of strengths and challenges in learning with an eye on language underpinnings
   - Helping to decide who needs what service from whom

2. **Guiding language-sensitive assessment/instruction/intervention delivered by others, including accommodations for students with disabilities.**

3. **Providing intervention to students on language underpinnings in collaboration with others.**
4. Providing speech and language therapy to students eligible for Speech Language Impaired (SLI) programs. With respect to #4 we have to remember that RTI is an overarching framework that includes special education.

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**Q**

**Pamela Polk**

What assessments could be used to document progress and growth during the RTI process?

**A**

**Barbara J. Ehren, Ed.D.**

There are really two different kinds of progress monitoring that often require different tools. One is for the purpose of benchmarking student progress against a specific standard to see if a student is meeting growth expectations. The other is more of a formative assessment to ascertain what direction should be taken in intervention. The instruments/procedures used for benchmarking don't always help with informing intervention at the level of specificity needed to determine an intervention path. For example if one uses words per minute as a measure of progress in reading fluency, you still don't know what accounts for the student's performance and therefore what to do about it. A student could lack oral reading fluency for a number of reasons. Each reason would have a different intervention direction. It is my suggestion that benchmarking assessments be done in terms of curriculum targets. Ordinarily these have been in reading and writing (and core academic subjects in secondary). While listening and speaking are also key curricular areas, we are struggling with how to benchmark them. Ron and Sandy Gillam are doing some interesting work with narrative assessment that holds promise. Regarding formative assessment, the data an SLP would normally provide to capture a student's progress in language underpinnings would serve this purpose. In another question Nicole talked about use of rubrics. Check my response to that question for thoughts about the use of rubrics.

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**Q**

**Katharine V Noble**

Hello. I'm an SLP in several public schools serving K-12. I've been asked by administration to use RtI as a way to serve kids with speech artic issues only -- that is, their speech patterns do not affect their academics. Other administrators have told me not to serve these kids at all, since their speech does not directly affect their education (though I disagree with this statement, it is our district's policy). What role does RtI play in our helping kids with speech-only issues, if any?

**A**

**Barbara J. Ehren, Ed.D.**

As I reported in another response, the litmus test of educational significance is required by federal law. We cannot serve a student as a student with a disability unless the disorder has adverse educational impact. So it's not your district who invented this policy. I feel strongly that students with single sound articulation errors without adverse educational impact should not even be treated under the auspices of an RTI process.
Ellie Ingerick

What are some of the most effective Tier 2 and 3 interventions for improving reading comprehension of narrative text? ...for development of content vocabulary?

Maureen Staskowski, Ph.D.

Here are a number of resources that I rely on for Vocabulary and Comprehension Instruction:

1. Website Doing What Works (DWW)

The [Doing What Works website](http://www.whatworks4learning.com) is sponsored by the U.S. Department of Education. It is an online library of resources to help educators implement research-based instructional practices from the What Works Clearing House. It provides extensive information and examples with practice summary, videos, lesson planning tools, self-assessment and more. Vocabulary instruction and Comprehension strategy instruction are topics I refer to frequently on this site. Here is a link to the [Vocabulary section](http://www.whatworks4learning.com/vocabulary) which is found in the Adolescent literacy section.

2. Book and Website

The book Explicit Instruction: Effective and Efficient Teaching By Anita L. Archer and Charles A. Hughes is part of the What works for Special Needs Learners series of books by Guilford. It has an extensive companion website with video demonstrations. Here is a link to a [demonstration vocabulary lesson](http://www.whatworks4learning.com/vocabulary) for adolescents.

3. Book and Website

Another great book that has great online resources is: [Word Wise and Content Rich: Five Essential Steps to Teaching Academic Vocabulary](http://www.heinemann.com) by Douglas Fisher and Nancy Frey, 2008. Portsmouth, Heinemann The author?s five-step model shows you how to:

- Make it intentional: select words for instruction and use word lists and up-to-date website lists wisely
- Make it transparent: model word-solving and word-learning strategies for students
- Make it useable: offer learners the collaborative work and oral practice essential to understanding concepts ? Make it personal: give and monitor independent practice so students take ownership of words
Make it a priority: create a school-wide program for word learning. Heinemann provides online resources including chapter-by-chapter study guides, audio podcasts, and video podcasts.

4. Website
Missionliteracy.com is a website put together by regional literacy coordinators in Michigan. Here is a link to the Vocabulary Resources page.

5. Intervention program examples
In our Tier two and three Intervention programs we have worked with the schools to look beyond reading decoding.

- Sequential instruction of comprehension strategies for content areas and narratives.
- West Ed Academic Literacy
- Teaching Reader?s Apprenticeship strategies in the content areas. SRA/McGraw Hill
- Read to Achieve Comprehending Content Area Text and Read to Achieve Comprehending Narrative Text
- Programs that teach morphemes: prefixes, suffixes and word bases Spelling with Morphographs by SRA McGraw Hill Vocabulary with Morphemes by Sopris West

Kristine Dispensa
How do we, as SLPs, truly and effectively implement RtI in a school setting? Realistically, teachers do not appreciate or want our presence in the classrooms. They feel it is a disruption to their instructional time.

Barbara J. Ehren, Ed.D.
A systemic implementation of RTI will require a great deal of collaboration from teachers and support personnel at a school. For focus on Tier 1, or core instruction, SLPs may very well be in classrooms assisting teachers in differentiating instruction for diverse learners, including those with language issues (some of whom may have language disabilities). Interventions in other tiers may take place in a variety of settings, including classrooms. Details regarding how this actually works need to be negotiated with all involved educators. Having other professionals in a classroom doesn?t have to disrupt instructional time if logistics are discussed by all. I suspect that at the root of this issue, however, is ?culture? (i.e. there has to be a culture of collaboration at a school for this kind of partnership to occur). And RTI surely requires partnerships. I suggest on-going professional development, perhaps including the creation of a PLC (Professional Learning Community) to address collaboration on behalf of all students at a school, especially those who struggle.

Nicole
Does qualitative data have a place in determining progress? "RTI me" understands the need for measurable data and graphs; however "SLP me" knows that vocabulary and comprehension
interventions are not black/white and involve several skills combined. I would much rather use a rubric to express student growth of comprehension strategies over time such as visualizing, using prior knowledge, etc. What are your thoughts on finding a happy medium?

Barbara J. Ehren, Ed.D.

Hooray for you for recognizing the complexity of language comprehension processes! One of the biggest challenges we have in RTI is progress monitoring - keeping track of "real" targets that make a difference in a way that makes sense. For example, tracking words per minute tells you nothing about comprehension. I think the idea of using rubrics is worth exploring and these tools CAN provide quantitative data, especially if you construct analytical rubrics that define aspects to the process. So for example, instead of a holistic rubric on vocabulary construct an analytical one that lists several aspects of vocabulary - maybe (1) understands the meaning of x number of words taught this period (2) gives a synonym or defines function for x number of words (3) uses in a sentence, etc. (You get the idea). A comprehension rubric could capture all the items you list and more. The trick is to provide enough gradations on a scale to show progress; so a rubric that has many points and is sensitive to growth might be a way to go. I know we are used to 5 or fewer points on a scale, but more might give us the sensitivity we need.

Karen Copeland

Where do we draw the line re: articulation needs? We recently met as a group in our district and most are using an RTI model instead of an IEP/504 for mild artic issues. Teachers and parents are so used to (and expect!) receiving these services in the school setting under SPED that I can't imagine some parents taking their child to receive services outside of the school setting. Any insights would be appreciated.

Barbara J. Ehren, Ed.D.

As I reported in another response, the litmus test of educational significance is required by federal law. We cannot serve a student as a student with a disability unless the disorder has adverse educational impact. So it's not your district who invented this policy. I feel strongly that students with single sound articulation errors without adverse educational impact should not even be treated under the auspices of an RTI process. I do think these students can be helped in a kind of "speech club" framework that might be part of an SLP's workload. However, to call that RTI, to me trivializes the substantive work with academic and behavior problem solving that should be the hallmark of RTI in which the SLP participates. The language underpinnings of literacy, curriculum and behavior should be what we address within RTI. But by all means find alternative ways to avoid labeling students with single sound artic students as students with a disability. Call your work something else, like "speech club." Just don't call it RTI. If you do you may just be reinforcing our stereotype as "speech teachers" that we have been trying to overcome.
**Dean Caouette**

ELL/Students and students from low SES often arrive to school with diminish vocabularies that effects the student's academic growth. They can often decode words, remember high frequency words and sound great but later in school that lack of vocabulary and academic language catches up to them and how do we put interventions in to address this need?

**Barbara J. Ehren, Ed.D.**

For the most part with the populations you mention, the central issue is the kind of CORE INSTRUCTION they are receiving. It is not primarily an intervention issue. RTI has to be predicated first and foremost on a robust core curriculum, appropriate to the students in a given school community. So, for example, if we already know that a school has an ELL or low SES population the basic curriculum has to address the needs of these students.

**Jill Trubia**

What is considered Tier 2 for language intervention?

**Barbara J. Ehren, Ed.D.**

The answer to this question would vary among states and school districts. Some agencies do not even use the term “tiers.” In general, however, one would expect a Tier 2 intervention to be less intensive and of shorter duration than later tiers. There is no one set of criteria for the meaning of intensity and duration. Tier 2 would also likely be implemented in small groups.

**Julia Cotter**

If you are using an RTI model, what about the legality of "placement" with out an IEP?

**Barbara J. Ehren, Ed.D.**

Interventions in preliminary tiers of RTI (outside of special education) do not constitute placement in special education. However, what many states/districts are grappling with is how to utilize personnel previously associated with special education (like SLPs and special ed teachers) to deliver some of these interventions. The complexity of the situation increases when mixing students with IEPS with students who don't have them in instructional groupings. Such groupings may make perfect sense and be beneficial to students. However, state regulations and district policies may have provisions about this. All educational agencies are struggling with catching their rules up to current RTI implementation. Check the regulations in your area. Hopefully we all will get further guidance when IDEA and ESEA (formerly NCLB) are reauthorized in the near future.

**Liz**
1. Do you feel that by the time students reach high school, they no longer need Speech/Language services? 2. Do you think that students who are classified as having a Mild Cognitive Impairment should not receive Speech/Language services?

Barbara J. Ehren, Ed.D.

Regarding #1, I feel strongly that we belong as integral members of high school faculty. For a glimpse of how strongly I believe this please read:


Regarding #2, I feel that cognitive referencing should not be used to make decisions about who receives therapy. The issue for me is who will not thrive without intervention from an SLP? However, that intervention may take several forms, including indirect services where the SLP works with others on behalf of students.

N Frumkin

Is there an evidenced-based sequence of procedures to follow when rolling out a successful SLP/RTI program across a school district?

Barbara J. Ehren, Ed.D.

To my knowledge there have not been any empirical studies addressing this issue of a sequence; therefore, there is no strong evidence base. However, from my experience in working with schools, districts, and states on RTI implementation, here are leverage points I think SLPs should focus on when rolling out involvement in RTI:

1. Advocate for important and appropriate roles
2. Make room on the plate for substantive work with the language underpinnings literacy and curriculum.
3. Expand service delivery options
4. Develop IEPs carefully
5. Create and maintain a flexible schedule
6. Move toward a workload approach

Thomas Rosati A.T.P.
Medicaid regulations regarding the need to provide therapy instead of teaching for billing purposes have been problematic for SLP's and TSHH's in schools. What strategies do you recommend for providing RTI services following sound educational practice with clinical and therapeutic models?

**Maureen Staskowski, Ph.D.**

It is important that we provide the services we deem necessary as professionals. At times that means that the services we provide may be billable and by all means we should bill for those billable service. However, we should not shape what we do for students around what is billable.

**Amy Tullier**

Is RtI basically doing "speech therapy" without all of the paperwork of an evaluation and IEP? You are intervening in a need area and monitoring progress?

**Maureen Staskowski, Ph.D.**

I assume you are talking about language. If you mean speech, then please see Barb's answer to another question that addresses the notion of RTI for articulation.

In the article cited below Laura Justice provides a nice overview of the RTI model. I believe that too often, RTI is reduced to the idea of intervening off-caseload. Sometimes you will hear people use RTI as a verb - "RTI him" or refering just to an intervention "it's RTI time."

RTI is really about systems change. It is about building a Multi-Tiered System of Supports (MTSS) in general education so that all students can access learning. In the white paper by NASDSE and CASE (the link is below), notice that the first steps in implementing this model are providing a high-quality curriculum within which most children achieve. In an RTI model, benchmark information is used to assess the success of core instruction and analyze areas to improve instruction for all students. I believe that in the application of RTI to language, sometimes this foundational step is lost and suddenly we are talking about individual services for students (off caseload). If we are to talk about oral language in an RTI model, then the first step is assessing the success of core instruction in helping all children to achieve in oral language.

When issues are addressed with all students, then there is a continuum of increasingly intensive supports for children with language needs, there is not an immediate "jump" to providing services by a special ed service provider (SLP) without an IEP. This should be a strategy that is a last step/resort.


NASDSE and the Council of Administrators of Special Education (CASE) White Paper on RtI. Download a free copy of the CASE White Paper on RtI.
**Q** Teri-Anne Cox
Given that our caseloads, in the schools, are driven by numbers of students that qualify for specially designed instruction, is there a recommendation to our administrators on how we can "count" children serviced, by us, via the RTI model?

**A** Barbara J. Ehren, Ed.D.
It is essential for RTI implementation that SLPs implement a "workload approach" (ASHA, 2002) which involves scheduling and accounting for all the work they do with and on behalf of students, along with other activities that are part of their school day. However, for that to happen to the extent necessary to fully implement RTI, major changes have to be made in the way SLP services are funded. As long as money is attached to students eligible for services under IDEA, states and districts will continue to count heads (i.e. use a caseload approach). If you can get your system to move to a workload approach and count all your activities, that would be great. Many places are exploring alternative formulae for "counting" the work of SLPs although these efforts are at rudimentary stages.

**Q** Jim jaeger
Are there progress monitoring tools that are sensitive to gradual growth in basic language areas?

**A** Barbara J. Ehren, Ed.D.
Sensitivity to gradual growth in basic language? I'm going to address regarding oral language. I recommend that we look to some outstanding work that has been done in Australia as a springboard for continued development in this area. See "The Language Support Program" (LSP) is a substantial program comprising direct assistance to teachers in developing strong oral language competency in children and young people to maximise their learning potential. It is founded on a framework of empirical evidence, which acknowledges that improved teacher knowledge and skills, conveyed in explicit teaching, respond to students' readiness to learn, and result in positive learning outcomes. The Language Support Program is based on the extensive research of Dr John Munro (The University of Melbourne).

**A** Maureen Staskowski, Ph.D.
Barb discusses this issue in another response. Despite some attempts out there to come up with tools to meet this goal, there continues to be a lack in this area. Below are some resources to address progress monitoring.

An excellent article by Sandra Gillam & Laura Justice in the ASHA Leader in 2010 discussed the monitoring of language skills.

A presentation entitled, “Curriculum-Based Language Assessment for Intervention Planning” by Lesley Raisor-Becker, and Nancy Creaghead at the Ohio Speech Language Hearing Convention in 2010 covered this topic very well.

A great resource for looking up progress monitoring tools is the National Center for RTI’s Progress Monitoring Tools page.

**Kathy Peterson**

More and more of the older students discussed in our RTI meetings seem to have some sort of language impairment. Is there a way to identify them earlier? Are there programs available to help with this intervention?

**Barbara J. Ehren, Ed.D.**

It is not surprising that older students encountering academic or behavioral problems have language problems (and perhaps impairments) at their base. While it is possible to identify many students with language problems early in their schooling, it is also the case that some students do not experience difficulty until the academic requirements become more complex in later grades. We may not always find packaged programs, but SLPs know how to address language underpinnings in older students.

**Katie**

Should the SLP provide direct instruction to the child when using RTI or should they consult with the teacher and parents to provide ideas for strategies and supports?

**Barbara J. Ehren, Ed.D.**

All of the above. As we have indicated in other responses work with RTI involves direct work with students and indirect work with others.

**L. Syverson**

Do you feel SLPs should be involved more in whole group, small group or 1-1 instruction during the RTI process?

**Barbara J. Ehren, Ed.D.**

My short answer is “all of the above.” See below for details:

**Across Tiers**

Look at students individually, deciphering patterns of strengths and challenges in learning.
Look at students individually, deciphering patterns of strengths and challenges in learning.

- Analyze tasks by identifying component parts, breaking them down into smaller parts, and highlighting language components.
- Select instructional and assessment language to match students’ comprehension.
- Scaffold instruction based on the learners’ language needs within the context of classroom performance.

## Tier 1

- Guide teachers’ language-sensitive content instruction.
- Identify the nature of poor academic performance in the classroom, with an emphasis on language underpinnings.
- Analyze screening and progress monitoring data to uncover language factors in performance.
- Administer screening and progress measures on selected students who may be suspected of language problems, as opposed to taking on administration of screening and assessment measures for the entire school.
- Assist teachers in identifying language underpinnings that may be interfering with learning academic content.

## Tier 2

- Provide input with regard to the selection of interventions.
- Collaborate with other interventionists to implement interventions.
- Interpret progress monitoring data with regard to language implications.
- Provide short-term interventions for students not enrolled in special education.

## Tier 3

(In many places Tier 3 includes intervention outside of special education and then ultimately special education. Other places have a 4th tier which is special education. For clarity here I’ll call special education Tier 4)

- Provide input with regard to the selection of interventions.
- Collaborate with other interventionists to implement interventions.
- Interpret progress monitoring data with regard to language implications.
- Provide intensive, individualized interventions outside of special education.

## Tier 4

- Provide therapeutic intervention for students with language impairment LI within special education.
- Determine accommodations needed to access the curriculum for students with LI.
**Lindsey**

How are students who receive RtI speech-language time counted/considered into caseload?

**Barbara J. Ehren, Ed.D.**

In most places they are not counted as part of caseload as caseload is defined as students with IEPs. A few states/districts do count non-IEP students as caseload. However, the real issue is that our systems need to abandon the caseload structure of defining workscope and load and move to a workload approach. See ASHA, 2002 policy documents on a workload analysis approach.

**Lindsey**

What is the SLPs role in RtI? What is the best use of their time/resources?

**Barbara J. Ehren, Ed.D.**

For current ASHA policy regarding SLPs’ roles, see the new policy documents on Roles and Responsibilities of Speech-Language Pathologists in Schools (ASHA, 2010). For my role definition for RTI, see the response to another question where I outline activities in tiers.

**Lindsey**

Are there guidelines for SLPs to follow when integrating themselves into the RtI process?

**Barbara J. Ehren, Ed.D.**

Here are my guidelines:

1. SLPs provide services that make use of their unique contributions.
2. SLPs are involved in some way across tiers.
3. SLPs implement IEPs of identified students.
4. SLPs support teachers in providing assistance to struggling students.
5. SLPs utilize a variety of delivery models, including indirect services.
6. SLPs have a reasonable workload; that is, RtI activities are not add-ons to their existing workload.

**Sarah Searcy**

We are currently providing RTI services in the areas of articulation and language. Are speech pathologists involved in reading RTI services and to what capacity?

**Maureen Staskowski, Ph.D.**

I think it might be helpful for you to take a look at the ASHA documents about SLPs? Roles and Responsibilities Related to Reading and Writing. Here is a link and reference to the Guidelines...
paper. There is also a Technical Report, Position Paper, and Knowledge and Skills documents that you can find in the same location.

- Roles and Responsibilities of Speech-Language Pathologists With Respect to Reading and Writing in Children and Adolescents [Guidelines].

**Q** 
Caroline Winters  
Does a specific documentation requirement exist for tracking interventions prior to identification?

**A** 
Maureen Staskowski, Ph.D.  
There is not a federal documentation process, so school systems have developed this (or are in the process of developing this). In some places, it comes from the state and others at the local level.

**A** 
Barbara J. Ehren, Ed.D.  
Documentation requirements vary with school districts.

**Q** 
Katie Guthrie  
How do we go about the shift to RtI model, when I have a full caseload of students on IEP's who have mandated services?

**A** 
Maureen Staskowski, Ph.D.  
Many of our other responses speak to this in some way. Truly the efforts for SLPs to use service delivery practices that are educationally relevant, classroom based, and collaborative—as well as for SLPs to contribute to the greater efforts of the school such as by serving on school improvement and curriculum committees— all fit together. The more an SLP does any one of these, the easier it is to do the rest. It far easier to provide curriculum-relevant services when you are spending some time in the students? classrooms than when service delivery is in isolation (pull out). It is easier to consult about students at-risk when you are already in their classroom. It is easier to participate in data dialogues about the grade level when you have a collaborative relationship with the teachers. These are just a few examples.

An article by Staskowski and Rivera below outlines how increasing your curriculum-relevant practices can lead to, and make it easier to, participation in the school?s RTI initiative. Another article listed below provides a rubric for SLPs? self-assessment of their participation as part of the school?s literacy team. I would review ASHA's recently revised professional issues statement on the Roles and Responsibilities of the SLP in Schools and perhaps Nancy Creaghead and colleague?s article in Perspectives about the current roles of SLPs.


**Kimberly Seymour**

The SLP’s role in RtI for phonemic and phonological awareness is well-known and more widely practiced. What guidance can you provide on RtI interventions and assessments in the areas of 1. vocabulary as it relates to reading comprehension and 2. oral narration skills as it relates to reading comprehension/retelling? I am ready to advance my RtI efforts beyond early literacy skills and would like guidance on the above. Thank you!

**Maureen Staskowski, Ph.D.**

I only have time to provide a partial answer to this question. A resource that many SLPs have used to embark on narrative intervention with data collection is the Story Grammar Marker and related products (Story Braidy) by Maryellen Moreau. There is a data collection manual. SLPs have been able to help their school staff see the need for intervening in this area.

More and more SLPs are sharing strategies for writing intervention with school teams. Mark Shinn has suggestions for CBM for writing that have been incredibly useful for progress monitoring.

Vocabulary can be approached from many angles. One intervention is to address morphology. There is a vignette on the [Doing What Works website](http://www.dowhatworks.org) that shows a teacher using Greek Mythology to teach this. Specific intervention products for morphemes is in another answer.

**Cheryl Turner**

Given the situation we have here in Canada where we typically have about 18% of the SLP staffing ratios that you would find in US schools, how would you prioritize and deliver services to all three tiers? For example I am an SLP responsible for 6 schools (with over 1,000 students) in a 90 mile radius. Should I attempt to serve just one of the tiers? If so which one?

**Barbara J. Ehren, Ed.D.**
Ah—where to begin in such a situation? I would say by all means focus on students with substantive language disabilities adversely affecting academic learning, social interaction, and behavior. Then I would address helping teachers strengthen core instruction (Tier 1) because without that you don't really know who needs intervention.

Jillian Timberlake
Who directly provides the student with the RTI interventions— the teacher or SLP? If the SLP, how does this differ than providing therapeutic interventions?

Maureen Staskowski, Ph.D.
I speak about this in some of my other responses. In an RTI model, the school is developing a system of supports that increases in intensity. Language should not be treated differently than reading, so that means an entire continuum of supports is built from solidifying the core curriculum, supplementing the core (often by the teacher), to providing tier 2 supports (often by a number of service providers). If the student is seen for intensive intervention by the SLP for a short time, it would be the last choice. Many students have "wobbly" language skills that can be addressed in a number of ways by the team, sometimes with the consultation of the SLP. There may be a student who does not respond to these efforts, who the team is beginning to suspect has a disability and want to rule out whether a short intensive treatment would bump the student back on track.

Lana Harrington
The point of RtI seems to be a reallocation of the SLP’s 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. How will these expanded roles and responsibilities be incorporated into an already overwhelming workday of scheduled special education service?

Barbara J. Ehren, Ed.D.
Bingo! You have said it beautifully! The key is not adding one more thing to our already full plates but judiciously selecting the students with whom we can have substantial impact on their educational success. Let's take a look at whom we are serving, whether or not these students' "problems" meet the test of educational impact required by federal law. Do we really think students with single sound articulation errors meet the IDEA definition of students with a disability, no matter how much we want that error to be resolved? Let's also consider how we are serving students to ascertain whether we can be more effective and efficient with a variety of delivery models, including in-classroom services, both directly with students and on their behalf (indirectly with teachers and others.)
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<th><strong>Q</strong> Lyn Yates</th>
<th>What specific interventions can be used when teachers indicate that there is an underlying oral language problem for a child who is not responding to intervention in reading?</th>
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<td><strong>A</strong> Barbara J. Ehren, Ed.D.</td>
<td>Please remember that interventions within an RTI framework do NOT mean packaged programs. If you are an SLP, you know how to address oral language problems. It is no different in RTI. My suggestion is to get to the heart of the problem by using curriculum as a context and uncovering the language underpinnings that are interfering with success in reading.</td>
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<th><strong>Q</strong> Diane Nathan</th>
<th>Are school districts able to bill Medicaid for RTI services provided by an SLP?</th>
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<tbody>
<tr>
<td><strong>A</strong> Barbara J. Ehren, Ed.D.</td>
<td>If one considers RTI as the umbrella framework under which all services in a multi-tiered system of supports fits, then the speech-language services for which SLPs would normally bill Medicaid remain the same. Medicaid guidelines have to be followed.</td>
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<tr>
<th><strong>Q</strong> Nancy Tarulli</th>
<th>I am interested in: 1) What types of (SLP administered) assessments Barbara Ehren is recommending as well as, 2) How SLP consultants can better connect with school staff who are already overwhelmed and perhaps, not receptive.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A</strong> Barbara J. Ehren, Ed.D.</td>
<td>For one tool in formative assessment, I love to teach SLPs how to use the Qualitative Reading Inventory V to uncover language underpinnings at the root of reading problems.</td>
</tr>
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<tr>
<th><strong>Q</strong> Kathy Berger</th>
<th>How will the specific roles of the SLP and other special education teachers be defined using the RTI model?</th>
</tr>
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<tbody>
<tr>
<td><strong>A</strong> Barbara J. Ehren, Ed.D.</td>
<td>This response will likely differ from place to place as there is no one RTI model used across the country. My suggestions for SLP role definition are contained in my responses to Lisa Duffy and to L. Syverson.</td>
</tr>
</tbody>
</table>
**liela johnson**

What assessment measures are being used with struggling readers to determine the different levels of intervention needed?

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**Maureen Staskowski, Ph.D.**

A great description of the data-based decision making process is part of the Online Learning Module by the Iris Center.

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**Mac Barnett**

In New York our IEP Goals are assigned to numerous professional staff members to implement, considering this, how (e.g. what criteria or matrix is used) does one decide when the level of intervention requires the specialization provided by a speech pathologist rather than the intervention by a teacher in the English/Language Arts curriculum in the elementary school level?

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**Barbara J. Ehren, Ed.D.**

Once you reference IEP goals, you are talking about special education, which is the most intensive option in a multi-tiered instructional/intervention system (RTI). As with any IEP, when you have one in place you have already decided that special education and/or related services is/are required. The issue is who is qualified to provide speech and language therapy. I feel strongly that that is the SLP. However, I can't imagine SLPs providing intervention without collaboration from classroom teachers, if we really want to see progress.

---

**Jennifer Ray**

Children with phonological deficits often have speech development issues. Is it your experience that speech-language pathologists are seen as part of the solution?

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**Maureen Staskowski, Ph.D.**

As SLPs collaborate more closely with preschool and kindergarten teachers, they help the teachers to better scaffold instruction in phonemic awareness and phonics for all students, including those with articulation delays. We have repeatedly had teachers comment that they had never thought about mouth placement of phonemes and that having that simple knowledge has helped them to scaffold their teaching of sounds in ways they had not previously.

Also - it is sometimes difficult for teachers to scaffold phonemic awareness when students are stuck. Simple modeling by SLPs within the classroom has proven very helpful for teachers.
**Sue**
How are SLPs involved in using RTI as a part of SLD eligibility?

**Maureen Staskowski, Ph.D.**
Great question! SLPs’ expertise in looking at the students strengths and weakness related to his/her language system is critical in understanding their needs. Often times, having the SLP’s consultation during the decision-making process about the types of intervention and the adjustments as the intervention progresses, can lead to a better understanding of whether the student has instructional issues, or an underlying learning disability.

We find that sometimes, when the team has not included the SLP, the intervention selected did not as specifically target his needs, and therefore it is still not know as to whether he/she will benefit from intervention.

**Suzette Perrin**
With all the different interpretations of what RTI is and isn't per school and district, it sounds like the SLP will be at the mercy of the particular school interpretation in what the SLP can help with in the classroom situation? Do you feel that SLPs will need to help in educating the school culture about our roles as per ASHA guidelines?

**Maureen Staskowski, Ph.D.**
In many ways this is the beauty of this time period in education for SLPs. We can take this as a prime opportunity to step up and lead the interpretation of RTI. It is an opportunity to help others understand the many roles we play and the ways we can use our expertise to benefit students and staff.

ASHA's recent documents of the changing role of SLPs in schools (referenced in another question) is a great help.

CEC and IDEA Partnership also have helpful documents about the SLPs' role and expertise related to RTI.

Without stepping up and volunteering, you are right that the school's interpretation of RTI will ultimately affect the SLP, so we must speak up and participate. Besides, in economic times like these it is vital that we be seen as integral and effective staff members.

**Barbara J. Ehren, Ed.D.**
YES. YES. YES. YOU HAVE THE KEY!!!!!
That concludes our RTI Talk for today. Thanks to everyone for the thoughtful questions and thanks to our experts, Drs. Barbara Ehren and Maureen Staskowski, for their time today.

Please also take a few moments at the completion of this event to give us your feedback by taking our survey!

Related Reading from RTINetwork.org:

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

Additional Web Resources:

- ASHA RtI
- ASHA’s Roles and Responsibilities of Speech-Language Pathologists in Schools [Position Statement]
- ASHA’s Roles and Responsibilities of Speech-Language Pathologists in Schools [Professional Issues Statement]
- National Research Center on Learning Disabilities (NRCLD)
- IDEA Partnership
- National Association of State Directors of Special Education RtI Project
- National Center on Response to Intervention
- Project MP3
- Florida Center on Reading Research

Additional Resources:


- Ehren, B. J. & Whitmire, K. A. (2009). Speech-language pathologists as primary contributors to RtI at the
secondary level, *Seminars in Speech and Language*, 30(2), 90-104.