

Florida RtI Update

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Response to Intervention

Overview & research-based impact on over-representation

By George M. Batsche, Project Co-Director

Response to Intervention (RtI) has received considerable attention from practicing educators since its inclusion as one criterion for eligibility for SLD in the statute and regulations for IDEIA 2004. In addition, RtI is part of the eligibility process for the new Emotional and/or Behavior Disorders (EBD) category that replaces the EH/SED category in Florida. However, the application of RtI is much broader than its use in SLD or EBD identification. In fact, the basic components of RtI are included in broad-based general education reform initiatives such as the Continuous Improvement Model (CIM). The successful implementation of RtI principles encompasses general education initiatives first and special education application second.

Response to Intervention, in many ways, is simply another term for “data-based decision making” applied to education. The essential components of RtI include:

1. An integrated data collection/assessment system to inform decisions at each tier of service delivery;
2. A problem-solving method; and
3. Multiple tiers of intervention service delivery.

The “response” component of RtI requires two specific skill applications. First, student problems must be identified accurately. Second, the student responses that reflect those problems must be assessed in a reliable and valid manner. The “intervention” component of RtI also requires two specific skill applications. First, interventions must be evidence-based for the type of problem, the demographics of the student (e.g., gender, race, language) and the setting factors (levels of supervision, number of students in the room). Second, evidence must exist that the intervention was implemented with integrity and that the level of implementation (e.g., number of minutes per week) was documented.

The basic components of RtI are applied first to all students in a building to determine what percent of the students are responding to the “core curriculum” (both academic and behavior). Three questions are asked:

1. Is the core curriculum effective? (80% of students making benchmarks)
2. Which students are at risk for failure?
3. Does any over-representation of particular student groups exist in those students identified at-risk?

A decision must be made regarding levels of effectiveness and levels of over-representation (or disproportionality). If evidence of lack of effectiveness or disproportional-ity exists, then modifications must be made to the core instructional programs. If the

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core instruction is both effective and equitable, then Tier 2 (Supplemental) interventions are provided to those students identified as “at-risk.”

The primary characteristics of Tier 2 interventions are:

1. Interventions delivered to smaller groups of students either in the general education classroom or outside of the general education classroom.
2. Interventions must be provided in addition to core instruction. Academic Engaged Time (AET) predicts achievement better than any other variable.
3. Interventions focus on particular skill areas that need strengthening.

Progress monitoring of student performance is conducted frequently with the same measures used to assess Tier 1 performance. In an effective Tier 2 intervention, approximately 70% of the students receiving Tier 2 instruction should have a positive response to intervention and demonstrate aim lines that will reach benchmark performance. A small percent of students will not respond to Tier 2 levels of instruction and will require the most intensive instruction (Tier 3).

Tier 3 interventions are developed based on individual student needs following a problem-solving process that will use diagnostic assessment to inform intervention development. Progress monitoring of intervention effectiveness is the same for Tier 3 as in Tier 2. Characteristics of Tier 3 interventions are:

1. Interventions are delivered to very small groups of students or to students individually.
2. Interventions must be provided in addition to Tier 2 and Tier 1 instruction.
3. Interventions focus more narrowly on defined skill areas.
4. All Tier 3 (and Tier 2) interventions must be integrated with Tier 1 and Tier 2 instruction. These cannot be three completely different interventions that do not strengthen the work of the other interventions and core instruction.

Reducing Over-Representation

One of the greatest impacts of the RtI model is the reduction in over-representation of diverse student groups in special education, suspension/expulsion, and alternative education. However, the contributions that RtI makes to the reduction of disproportionality (improving equal access to effective educational services) can only be realized if the following conditions exist:

1. Students are identified early—by November of the kindergarten year.
2. Interventions are begun for the high-risk students.
3. Interventions are provided at least 60 minutes/day, five days a week.
4. Progress is monitored no less frequently than once every two weeks.
5. Interventions are modified based on student response to intervention.

6. The GAP between student performance and grade level never exceeds two years.

The impact of this model and its application to issues related to over-representation are research based. In our own work in Florida, both referral rates and special education placement rates of minority students dropped approximately 40% in schools characterized by early identification (kindergarten), early intervention, frequently collected data, and evidence-based interventions. Amanda VanDerHeyden’s research indicated that the growth rates in early literacy skills for African-American students (Low SES) increased more dramatically than for any other racial group when provided with services described above (1-5). Finally, Doug Marston’s research indicated that special education placement rates of African-American students could approach enrollment rates for African-American students when similar conditions exist.

It is clear that we can improve achievement rates and reduce disproportionality. However, this cannot be done with “better tests” or simply with documentation of lack of “bias” in assessment. What matters is intensive intervention, delivered early, monitored frequently, and modified to meet the needs of students. Clearly, this requires more effort than simply testing students and placing them in special education. A commitment to early assessment of all students (within the first 30 days of kindergarten), improved core instruction, early intervention with at-risk students (no more than three months from the beginning of kindergarten), and frequent monitoring of student progress using efficient assessment procedures will result in significantly fewer students failing. The current model is based on a “wait to fail” model that self-identifies students. The problem with this model is that once a student is identified, typically the GAP between student performance and grade-level skill requirements is too great (more than two years) to respond to the level of interventions available in public schools.

The RtI model is more equitable, efficient, and cost-effective than other models designed to promote benchmark performance for all students.

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Florida & RtI

By Michael J. Curtis, Project Co-Director

The Florida Problem-Solving/Response to Intervention (PS/RtI) Statewide Project was funded by the Florida Department of Education (FLDOE) in 2006. The project was awarded to the University of South Florida and charged with implementing two major components: a Statewide Training Initiative for all school districts in the State of Florida and a Demonstration Site/Pilot School Initiative to evaluate the impact of PS/RtI on educators, parents and students in controlled settings.

The project was funded in the Summer of 2006 for the purpose of establishing the infrastructure necessary to implement the Project and for conducting initial research on the beliefs, knowledge and professional development needs of school personnel in Florida relative to PS/RtI. Beginning in 2004, the FLDOE (through its Student Support Services Project) disseminated information regarding PS/RtI to stakeholder groups throughout the State of Florida. These groups included: Superintendents, Assistant Superintendents, Directors of Special Education, Directors of Student Services, Principals, Reading First, Positive Behavior Support, Reading Supervisors, Curriculum Supervisors, Student Services Personnel (School Psychologists, Social Workers, Counselors, and Nurses), the Institute for Small and Rural Districts, Regional Professional Development Groups, Statewide Professional Development Projects (e.g., Project Central) and other related groups. The purpose of this information dissemination was to ensure that service providers within the public education system were aware of legislative mandates regarding RtI, the basic principles and components of RtI, how RtI fits with other state initiatives, and the FLDOE's position regarding the implementation of a PS/RtI model. Largely because of this process of information dissemination and awareness training (Consensus Building), funding of the State PS/RtI Project was anticipated by many educators across Florida.

In 2006, the research data collected from district personnel throughout Florida were evaluated. Basically, educators supported the implementation of PS/RtI, but did not believe that they possessed the knowledge and skills to needed to implement these strategies without training and technical assistance. Consequently, the FLDOE PS/RtI Project was organized to provide personnel across the state with training and technical assistance to develop their capacity to support implementation of the model. In addition, the FLDOE wanted

to ensure that evaluation data were available to evaluate the effects of PS/RtI on educators, parents and students.

Project Staff

The Project staff consists of two Project Directors, a Project Leader, three Regional Coordinators, two Technical Assistance Staff (Technology and Training Module Development), an Evaluation Coordinator, and a number of Graduate Research Assistants to provide research, data, and training module development support. All staff, with the exception of the Project Leader and Regional Coordinators, are assigned part-time to the project.

Demonstration District/Pilot Site Initiative

Thirty-eight schools in eight school districts (12% of school districts in Florida) have been awarded Mini-Grants to serve as Pilot Sites for the purpose of evaluating the impact of Problem Solving/Response to Intervention. Each district has identified Comparison Schools—in addition to the Pilot Schools—to ensure a robust research design. Each of the 38 Pilot Schools will be supported through the services of a dedicated, full-time PS/RtI Coach—one coach for three schools.

All coaches will complete five days of training in July 2007 and additional training, as well as mentoring and support by a Regional Coordinator throughout the year. Each district will receive five days of training during the 2007-2008 school year. The training will be targeted specifically to the needs of each of the Pilot Schools. Training will be conducted by the Regional Coordinators and the Site-Based Coaches.

Technical assistance (TA) will be provided to the Pilot Site Coaches and the Pilot

Site Administrators by the Regional Coordinators. Technical Assistance will take the form of face-to-face TA, Web-Based TA, and telephone/email communication. Monthly TA sessions are scheduled with Pilot Site Coaches. Regularly scheduled TA meetings will be used to assist and support Pilot Site Administrators.

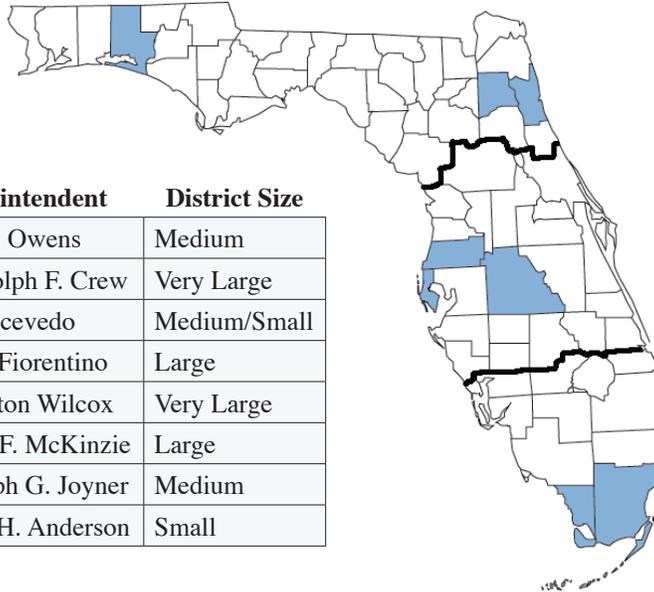
Statewide Training Initiative

In Fall 2007, the project will initiate statewide training for school-based teams from school districts across Florida. During the 2007-2008 School Year, five days of training will be provided in each the three state regions (North, Central, and South). The training will be conducted by the Regional Coordinators and support staff.

Florida is unique in its attempt to conduct a statewide initiative that includes both pilot sites AND statewide training.

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Announcing Eight Demonstration Districts Selected



District	Superintendent	District Size
Clay	David L. Owens	Medium
Miami-Dade	Dr. Rudolph F. Crew	Very Large
Monroe	Randy Acevedo	Medium/Small
Pasco	Heather Fiorentino	Large
Pinellas	Dr. Clayton Wilcox	Very Large
Polk	Dr. Gail F. McKinzie	Large
St. Johns	Dr. Joseph G. Joyner	Medium
Walton	Carlene H. Anderson	Small

Introducing Project Team Members

Clark Dorman, Project Leader

Mr. Dorman has worked for 13 years as a school psychologist in Orange County, Florida, the last three years of which included involvement in the design and implementation of an RtI project. His career in education began as a teacher in a psychiatric hospital for troubled adolescents where he participated in the development and monitoring of both psychological and educational goals. As a school psychologist, he has served as president of the Florida Association of School Psychologists as well as serving on numerous task forces and committees focused on the development and advancement of RtI efforts at the national and state levels.

Beth Hardcastle, Regional Coordinator – North

Ms. Hardcastle was a school psychologist in Santa Rosa County, Florida for 13 years. She initiated an RtI pilot program for Santa Rosa Schools, and her professional focus for the last several years has been improving intervention implementation in the classroom. She has presented on this topic at the district, state, and national level. She and Kelly Justice (Regional Coordinator – South) have recently co-authored a book related to RtI.

Denise Bishop, Regional Coordinator – Central

Ms. Bishop has worked in the education field for over 15 years as a school psychologist and administrator in Florida and Maine. Prior to joining this project, Denise was the Director of Program Standards and Professional Development, Office of Early Learning with the Florida Department of Education. Prior to that position, she was the school psychology state consultant with Florida’s Student Support Services Project.

Kelly Justice, Regional Coordinator – South

Ms. Justice has been a general education teacher for 10 years, most recently in Pasco County, Florida. As an educator of young children, early intervention is an ongoing practice in Kelly’s classroom. She has been involved in data analysis and has served on problem-solving teams at the school-based level. For the past two years, she has presented at the state and district levels on the topic of empowering teachers as effective interventionists. She and Beth Hardcastle (Regional Coordinator – North) have recently co-authored a book related to RtI.

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Technical assistance (TA) will be provided to the school-based teams participating in the Statewide Training on a quarterly basis. TA needs assessment will be conducted by the Regional Coordinators to determine the content of the TA sessions in order to ensure an efficient TA process. The content of each TA session will be provided to the school-based teams in advance to ensure that the participants understand clearly the focus of the TA. In addition to these face-to-face meetings, web-based TA will be provided as well. The web-based TA will be provided based on the on-going input of the school-based teams.

Project Evaluation

The project developed an evaluation plan that focuses on the impact of Problem Solving/Response to Intervention on the following variables:

1. Beliefs, attitudes, perception of skills and practices of educators.

2. Actual skill development and implementation of educators.
3. Satisfaction of educators and parents.
4. Evaluation of training and technical assistance.
5. Impact on students on the following variables:
 - a. Achievement
 - b. Behavior
 - c. Referral rates
 - d. Special education placement rates
 - e. Retention
6. The relationship between implementation integrity and student outcomes.

Accomplishments to Date

1. All identified staff positions have been filled and personnel have been trained.
2. The evaluation plan has been developed along with the evaluation instruments.
3. The Demonstration Districts/Pilot Sites/Comparison Schools have been selected and contracts between the university and each district are being finalized for the awarding of the Mini-Grants.
4. Instructional modules are being developed for the first year of implementation.
5. Administrative orientation meetings for District Leadership Teams and Pilot School Principals have been completed.
6. Training for PS/RtI Coaches was held July 9th through 13th.
7. A project website has been developed and is operational (www.floridarti.usf.edu).
8. The Fall 2007 Training Schedule for Statewide and Pilot Site Training is being organized.
9. Coordination with related initiatives (Reading First, Positive Behavior Support, Early Intervention, FLDOE Leadership Team, CASE, Florida Association of School Administrators) is on-going.
10. Coordination with the development of state-level regulations for eligibility for SLD and EBD is on-going.

Florida is unique in its attempt to conduct a statewide initiative that includes both pilot sites AND statewide training. The undertaking is a comprehensive, coordinated effort—and an exciting (ad)venture.

Florida RtI Update

Resources

This edition of the newsletter features selected Problem Solving/Response to Intervention resources. These electronic resources are also found on the Florida RtI website at <http://floridarti.usf.edu/resources/>

Colorado Department of Education's Response to Intervention (<http://www.cde.state.co.us/cdesped/RTI.asp#RES>) includes *Indicators of School Readiness for RtI: A Self-Assessment Tool*, *RtI Configuration Map*, and *Problem-Solving Model Self-Study*.

Flex Service Delivery System (<http://www.fsd.org/index.html>) is the website for the Problem Solving Model used in Illinois. The concept of problem solving is used in the broad context, and includes Response to Intervention. The site offers a clear overview of problem solving and RtI and includes many helpful resources. The *Overview* section provides information on introduction to the model, definitions, process, and professional development. In addition, the entire overview can be downloaded as a PDF document.

National Association of State Directors of Special Education, Inc. (NASDE) (<http://www.nasdse.org/projects.cfm?pageprojectid=23>) includes the NASDSE and CASE *White Paper* on RtI, which provides an overview for general education and special education with emphasis on core principles and components. Also available is a presentation, based on NASDSE's *Response to Intervention: Policy Considerations and Implementation*. The third component of this site is a paper entitled *Myths about RtI Implementation* which provides information about the purposes and intents behind the RtI model and how special education eligibility fits into this process.

Northwest Regional Comprehensive Center (<http://www.nwrel.org/nwrcc/nclb/rti.php>) is a compilation of resources related to RtI. Included in the *Catch Them Early* link are two symposium presentations. The link to the National Association of School Psychologists website includes a section of RtI resource articles. A free, online, interactive training, suitable as a general overview for RtI professional development, is available on the IRIS Center link (Star Legacy Module). The site also contains links to a series of RtI webcasts developed by California Department of Education.

Oregon Department of Education (<http://www.ode.state.or.us/initiatives/idea/rti.aspx>) has developed a project to provide training, technical assistance, and guidance to school districts who want to begin implementing RtI. There are many links on this site, referencing papers and presentations, but the *Resources for Schools* link is very helpful in expanding general knowledge and understanding of RtI. There is also a *Readiness Checklist*, designed to help districts assess readiness in the areas of leadership, teaming, curriculum, and screening.

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