

This report examines the current status of Response to Intervention in Maine. It includes a series of case study “vignettes” to illustrate implementation characteristics. This report also examines barriers and opportunities to further RTI implementation.

# Response to Intervention in Maine

Status report of  
Implementation

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## **EXECUTIVE SUMMARY**

As part of the Maine Education Policy Research Institute, the Center for Research and Evaluation examined the current implementation of Response to Intervention (RTI) in Maine in response to a request by the members of the Joint Standing Committee on Education and Cultural Affairs. The implementation of an RTI plan in all public schools in Maine was required as part of the Chapter 101 Maine Unified Special Education Regulation (MUSER, 2012).

RTI is a system of academic and behavioral supports that are evidence-based, and are provided to children in need through a systematic screening and re-evaluation process. Typically, RTI systems in schools are comprised of four elements: universal screening, progress-monitoring, a multi-leveled system of evidence-based supports, and data-based decision-making.

Data gathered for this report included a national review of the literature on best practices in RTI implementation, an examination of the results of a statewide needs-assessment survey, and a series of interviews conducted with key individuals associated with the implementation of RTI in Maine.

To date, Maine has made significant strides in the planning and initial implementation phases, including a series of statewide training sessions, the development of expertise within the University system, and the development of a comprehensive set of resources that schools may use to develop evidenced-based RTI systems. Selected schools and school districts have instituted comprehensive systems of supports and are reporting positive benefits associated with their efforts.

Despite these significant accomplishments, the overall level of implementation of RTI in Maine is limited. There are a number of specific barriers to increased implementation including an inadequate implementation of evidence-based practices, difficulty in shifting traditional policies and practices, and a lack of coordinated statewide support for RTI. There is currently no active RTI council, nor is there an individual in the department of education coordinating ongoing implementation of this initiative. The present focus in the department is to include specific RTI principles as part of other reform initiatives (such as the standards-based initiative) rather than as a stand-alone approach to academic and behavioral supports.

## Contents

EXECUTIVE SUMMARY. ....	1
PURPOSE OF THIS REPORT. ....	3
CURRENT STATUS OF RTI IN MAINE.....	3
WHY RTI?.....	4
WHAT IS RTI?.....	4
Universal screening and progress monitoring.....	5
Multi-level prevention system. ....	7
▫ Tier 1 Class or school-wide interventions .....	7
▫ Tier 2. Targeted interventions.....	7
▫ Tier 3. Intensive interventions.....	8
Data-based decision-making. ....	9
IMPLEMENTATION OF RTI IN MAINE. ....	10
Implementation timeline and survey results (December, 2007—April, 2010).....	10
Implementation timeline and survey results (May 2010—June 2013).....	110
SUMMARY OF INTERVIEW DATA.....	12
Potential benefits / costs of RTI.....	12
Facilitators to implementation.....	13
Barriers to implementation.....	13
FINAL POINTS FOR CONSIDERATION .....	16
REFERENCES.....	18
APPENDIX A: INTERVIEW NOTES WITH MAINE RTI EXPERTS.....	20
APPENDIX B: MAINE RTI READINESS CHECKLIST. ....	32
APPENDIX C: GLOSSARY OF TERMS FOR RESPONSE TO INTERVENTION .....	41

## **PURPOSE OF THIS REPORT.**

The purpose of this report is to provide members of the Joint Standing Committee on Education and Cultural Affairs with an update on the implementation of Response To Intervention (RTI) in Maine. This report begins with a brief summary of the current status of RTI in Maine. The report then takes a step back and briefly describes the goals and nature of RTI. A summary of efforts to implement RTI in schools across Maine using data from a 2010 state survey and more recent interview data from key RTI trainers and experts in Maine is then presented. The report concludes with a summary of the opportunities and barriers to continued implementation. To help the reader understand how RTI works, we have included a number of examples based on actual Maine schools—although we have changed details in these examples in order to provide confidentiality for these students and schools. These “snapshots” highlight the various aspects of the RTI framework.

## **CURRENT STATUS OF RTI IN MAINE.**

Based on reports from experts and stakeholders, the implementation of RTI has slowed considerably in Maine. Following the regional trainings coordinated by the MDOE during late fall 2009 through February 2010, there have not been any additional state or regional trainings provided that are specific to RTI. Nevertheless, the MDOE website does contain valuable resources and information regarding RTI, with this information most recently updated in November of 2012.

A number of districts/schools have continued their work on the behavioral aspect of RTI using the Positive Behavior Interventions and Supports (PBIS) approach, but there is currently no centralized effort by the State to implement PBIS statewide. Professional development efforts have also been supported at the individual district/school level. In such cases, the degree of expertise about RTI by the trainers/consultants is variable.

## WHY RTI?

In order to understand RTI implementation in Maine, some background on the nature and purpose of RTI would be valuable. A major concern for education professionals, parents, community members, and policy makers is how to effectively identify and support children who experience academic, social-emotional, and/or behavior issues in school. Federal laws (i.e., No Child Left Behind Act [NCLB], 2001; Individuals with Disabilities Education Improvement Act [IDEA], 2004) have directed schools to focus on providing high quality, research-based instruction and interventions, and these laws hold schools accountable for the academic achievement of all students in meeting grade-level standards — a framework otherwise known as Response to Intervention (RTI). Maine has adopted *General Education Interventions* to reflect this federal requirement as part of the Chapter 101 Maine Unified Special Education Regulation (MUSER, 2012).

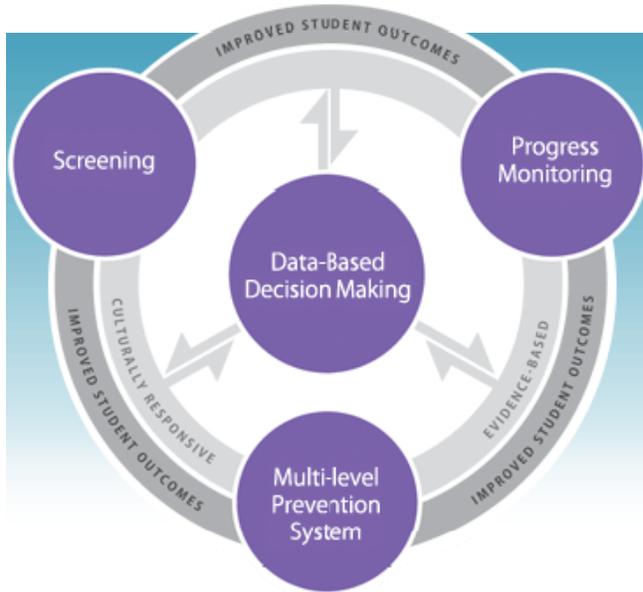
### *MUSER Section II.17*

*General education interventions* are general education procedures involving regular benchmark assessment of all children, using Curriculum Based Measurements (CBM), to monitor child progress and identify those children who are at risk of failing. Children who are at risk receive responsive interventions in the general education program that attempt to resolve the presenting problems of concern. General educators are encouraged to confer with specialists and teaching professionals, but general education personnel are responsible for the implementation of the intervention.

## WHAT IS RTI?

RTI is considered to have four distinguishing characteristics: (1) screening for academic and behavior problems, (2) continuous progress monitoring, (3) multi-tiered system of supports, and (4) data-based decision making. Therefore, it is best defined as a school-wide process for implementing high-quality, scientifically-based interventions based on learner needs that include universal screening of all students for academics and behavior, progress monitoring of student performance, adjustment of instruction based on student response, verification of implementation fidelity, and data driven team-based educational decisions that can be applied to general, remedial and special education (Brown-Chidsey & Steege, 2010; Jimerson, Burns, & VanDerHayden, 2007; Johnson, Mellard, Fuchs, & McKnight, 2006, Mellard & Johnson,

2008). In this way, teaching and learning within a school becomes more consistent, as do the educational opportunities afforded to children (See Figure 1).



**Figure 1. Essential components of RTI; NCRTI, 2013**

***Universal Screening and Progress Monitoring.***

Screening measures are short assessments, observations, or other procedures that can be rapidly administered to all of the students in a school or district and are designed to predict a future outcome based on a certain criterion measure that allows for schools to intervene as early as possible (Johnson, Jenkins, Petscher, & Catts, 2009). Within the context of an RTI framework, universal screening is a necessary first step in identifying students who are at risk for academic or behavior difficulties. Typically, these measures are very quick to administer, simple, and predictive of those children who are at risk.

***RTI Snapshot 1.1—Universal Screening***

The third grade teachers at Cascadia Primary School administered the fall universal screening for math and reading to all students during the second and third week of school. The school adopted the Northwest Evaluation Association (NWEA) five years ago. According to the National Center on Response to Intervention (2013), this assessment tool partially meets the technical rigor, efficiency, cost, and implementation requirements to be used as a universal screening measure within an RTI framework. The fact that this is a computer-based assessment led to some initial technical challenges for the school; however, once these were addressed, teachers have reportedly been positive about the instrument because it is easy to implement and the results are immediate. Furthermore, they can use the data to help evaluate the effectiveness of the core reading

curriculum, as well as to identify areas in which specific students are struggling so it is formative in nature.

Progress monitoring (PM) has a different purpose and function than universal screening. It is used to assess student academic performance on a more frequent basis and is administered at all levels of instruction and intervention (Johnson, Mellard, Fuchs, & McKnight, 2006; Fuchs & Fuchs, n.d.; Speece, n.d.; Stecker, Lembke, & Foegen, 2008), with individual students or an entire class, across general and special education (NCRTI, 2010). The primary aim of PM is to use assessment data to identify students not making adequate progress or responding to instruction, and to estimate rates of student improvement in order to make informed instructional decisions (Johnson, et al., 2006; Quenemoen, Thurlow, Moen, Thompson, & Morse, 2004). With that said, PM measures are meant to be administered to students on fixed intervals and, therefore, must be brief and easy to administer. Additionally, they need to provide scores on a constant metric in order to accurately measure student progress and these scores should be predictive of end of year outcomes.

Regardless of the specific purpose and use of assessments that are employed within an RTI model, RTI requires that screening and progress monitoring assessments meet specific criteria as cited in the literature (Yeo, 2011). First, tools must be sensitive to both short-term and long-term change in student performance (Hagaar, Klinger, & Vaughn, 2007). Second, assessments must guide practitioners to make meaningful decisions about instruction and curriculum planning, thus, are *formative* in nature (Fuchs & Fuchs, 2006). Third, assessments have to be efficient and effective (i.e., quick and easy to implement and score, cost effective) for schools to screen all students and progress monitor individual student response to instruction (Hagaar, et al., 2007). Assessments that meet these criteria are known as *Curriculum-Based Measurements (CBM)*. Considered as a general outcome measure, the unique features of CBM are well suited for decision making within a problem solving (Shinn, 2008) or a RTI framework of service delivery (Fuchs, Fuchs, McMaster, & Al Otaiba, 2003).

*MUSER Section II.13*

For purposes of general education interventions, the term *formative assessment* means using standardized administration procedures with direct, on-going, individualized, assessments that have been shown to have predictive validity and which generate reliable rate based data about a student's actual performance

### ***Multi-Level Prevention System.***

The third essential element of a high quality RTI implementation is a set of interventions that address different levels of student needs. In an RTI framework, the levels of intervention are referred to as tiers. Most RTI models have three distinct tiers (Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs, Fuchs, & Compton, 2012) that increase in intensity, which represents a continuum of academic and behavior supports (Brown-Chidsey & Steege, 2010; Fuchs & Fuchs, 2005, 2006, 2007; Fuchs & Deshler, 2007).

A short description of the most common tiers accompanied with supporting vignettes follows:

- ***Tier 1 Class or school-wide interventions.*** Also known as primary prevention, Tier 1 includes all students and consists of a scientifically validated core academic curriculum and behavioral supports that meet the needs of most students representing about 80% of a school's population (Fuchs & Fuchs, 2007). General education teachers deliver Tier 1. Students identified as being at risk for academic or behavioral problems by the universal screening process undergo frequent progress monitoring to determine if their needs are being met by the general education curriculum or whether they require more intensive intervention. Students, whose progress is not adequate, may benefit from Tier 2 instruction.

#### ***RTI Snapshot 1.2—Multi-Level Prevention System***

At the start of the school year, Mrs. Gilbert has a good idea as to who will need reading intervention. She has reviewed all her students' files, which includes the end-of-the year third grade testing data. She is unsure, however, of one of her students, Kayla, who just transferred to the school. Her file did not include any recent reading assessment information or documentation that she received additional supports for reading at her previous school. Her current NWEA scores show that she is struggling in reading. Mrs. Gilbert discussed her concerns about Kayla with the school's intervention team, and together the team selected a research-validated program that addressed phonological awareness, word study, and fluency skills, to be delivered by a skilled reading specialist, Mrs. Kyes. This program was designed to be administered within a Tier 2 group comprising two-six students, for 20–40 minutes per session, three times per week for ten weeks. After seven weeks, progress monitoring data showed that Kayla was not responding to this intervention program at an adequate rate. Mrs. Kyes then made the decision to intensify her Tier 2 implementation of this program by adding an additional 15 minutes per session.

- ***Tier 2. Targeted interventions.*** This level of secondary prevention has evidence-based interventions to meet the needs of most students (about 15%) at-risk for learning or behavioral challenges. In addition to the core instruction at Tier 1, students receive more

intensive interventions in small group setting by an individual who has been trained in the appropriate instruction (e.g., classroom teacher, reading/math specialists, para-educator). Tier 2 interventions can range in frequency (e.g., every day, three times per week) and duration (e.g., 10 weeks, 18 weeks). At the conclusion of this more intensive intervention, the child's progress is re-assessed and may continue with a similar Tier 2 intervention, return to Tier 1 instruction, or move to Tier 3 intervention.

*RTI Snapshot 1.3—Multi-Level Prevention System*

Mrs. Kyes set a reading fluency goal for Kelsey, and then implemented formal progress monitoring using DIBELS Oral Reading Fluency CBM probes. After ten weeks, Mrs. Kyes carefully analyzed Kelsey's scores to see if she was making adequate progress. Kelsey was not progressing at the rate needed to meet her goal, which indicates that she would likely need more intensive supports.

- ***Tier 3. Intensive interventions.*** Tertiary prevention addresses the needs of students who are at the most risk (about 5%) and who have demonstrated minimal response to interventions in Tiers 1 and 2. Tier 3 can be conceptualized in two ways, which includes either providing more intensive, individualized instruction or providing special education services. Services at this level are provided by specialists with specific expertise and knowledge of more intensive, *scientifically-based* interventions (e.g., behavior specialist, special education teacher). Interventions at Tier 3 are typically delivered in place of the core curriculum. At this level, students may participate in a more comprehensive assessment of skills to determine whether there may be other underlying learning difficulties (such as a learning disability) that may be contributing to their lack of progress.

*MUSER Section II.30*

*Scientifically-based interventions* means interventions that include teaching practices that have been tested in experimentally sound research studies and have been shown to significantly improve the academic or behavioral achievement of the children who present characteristics similar to the child involved in the general education intervention process.

#### ***RTI Snapshot 1.4—Multi-Level Prevention System***

At Claudette Regional High School, Bobby is a ninth-grader who is above average in math and has an IEP for an identified reading disability. He failed three classes the first quarter and appears to be struggling with the transition to high school. He lacks time management, organizational, and study skills, which are interfering with his ability to effectively complete his homework and in-class projects, as well as to study for quizzes/tests.

Bobby at Tier 1: Bobby participates in the general education for about 85% of his day for all academic and nonacademic activities with the exception of English class.

Bobby at Tier 2: Bobby was taught how to self-monitor for attention and performance. He has a recording chart that is provided to him at the start of each day when he checks in with a designated adult (in this case his advisor). Bobby self-assesses after every class and the current teacher signs-off. At the end of the day, he checks-out with his advisor. He charts his performance on a graph. He is in the fourth week of this intervention and there are 5 other students in the school that are doing this same intervention.

Bobby at Tier 3: Bobby was identified with a reading disability since the second grade and receives reading instruction with the special education teacher for 50 minutes per day. He currently is reading at a mid sixth-grade level.

In this case, the student has needs that are addressed at every tier. Yes, Bobby has an IEP for reading, but that does not place him as a Tier 3 student for everything. Additionally, from this scenario, it should not be assumed that Tier 3 is only for students with an identified disability. Students without disabilities receive individualized instruction at the Tier 3 level as well.

#### ***Data-Based Decision-Making.***

Using data to make decisions is the crux of all areas of RTI implementation and all levels of instruction. The primary aim of assessment and progress monitoring is for educators to use assessment data to effectively identify students who are not making adequate progress or responding to instruction and to use the data to estimate rates of student improvement in order to make informed instructional decisions (Johnson, et al., 2006; Quenemoen, Thurlow, Moen, Thompson, & Morse, 2004). In their seminal article *Inside the Black Box*, Black and William stressed the value of teachers' consistent use of data – describing it as assessment *for* learning (Black & Wiliam, 1998). In a similar vein, mainstream author-practitioners and long-time assessment “experts” have applied these principles to training materials designed specifically for practicing educators (Davies, 2007; Stiggins, 2005). These materials bridge the gap between the assessment literature and the classroom. While these authors use different terminology, they both stress the same basic components: student involvement in assessment, frequent informal measures, a focus on growth versus achievement, and adaptation of classroom instruction based on children's response to intervention. This frequent use of formative assessment measures is a hallmark of high quality RTI approaches.

### *RTI Snapshot 1.5—Data-Based Decision Making*

Evan is a second-grade student at Fairway Elementary School. When his teacher, Mrs. Carlson, administered the beginning-of-the-year universal screening measure for reading, his score fell slightly below the desired benchmark. To be certain that Evan's score accurately reflects his current reading performance, Mrs. Carlson decided to progress monitor Evan for seven weeks using a word identification fluency measure. At the end of the period, the school intervention team reviewed his progress-monitoring graph along with additional data from his school file and Mrs. Carlson's instructional observation notes. His progress monitoring data indicated that he was just meeting the benchmark. Although he was performing above the risk level, the team noted that his past reading assessment scores continually hover around the benchmark—sometimes just above and other times just below. Additionally, the team indicated that he does not possess any risk factors (e.g., attention or behavior problems, low SES) that might affect his ability to make progress in reading. The team concluded that Evan does not meet the eligibility criteria for Tier 2 reading intervention.

## **IMPLEMENTATION OF RTI IN MAINE.**

To determine the current state of RTI implementation in Maine, we drew upon two basic sources of evidence: 1) data from the spring 2010 survey of RTI implementation; and, 2) interview data from RTI trainers working with schools statewide and key personnel within the Maine Department of Education who were responsible for the implementation and oversight of the RTI initiative. The rationale for interviews came primarily from the limited response rate to the 2010 survey and the difficulty in finding a single person within a district who could accurately answer questions about implementation. Therefore, we identified those individuals who have conducted a large proportion of the RTI training provided to with Maine schools and interviewed them to determine what steps have been taken to train schools, and to gather data about the current levels of RTI implementation.

### ***Implementation Timeline and Survey Results (December, 2007—April, 2010).***

According to the *Response to Intervention Leadership Team Annual Report* (MDOE, September, 2010), a RTI Leadership Team in Maine was first instituted in January 2008 after a cadre of statewide partners (i.e., Maine Association of Directors of Special Education Council, Maine Parent Federation, Maine Education Association, Maine School Superintendents Association, Maine School Boards Association, Maine Principals Association) met in Washington DC for a RTI State Planning Meeting. At that time, the group crafted an action plan to support RTI in Maine. The team finalized the plan in April 2008 under the Leadership of Ellen Holmes. Over the next year, they developed an extensive website of resources complete with a guidance manual.

The RTI Leadership Team under a new director, Barbara Moody, organized regional trainings throughout the state during fall 2009 per the request by the Maine DOE Commissioner and Education Partners. The purpose of these meetings was to provide basic information about RTI and to take stock regarding the level of implementation at the school district level. After receiving professional development from national expert, Rachel Brown-Chidsey, twelve facilitators conducted these regional meetings from mid-December 2008 through February 2009. Approximately 650 educators representing about 24% of Maine schools attended these trainings; however, attendance at many schools was reported to be poor.

At the same time as the regional trainings, the RTI Leadership Team designed and posted an on-line RTI Readiness Survey. The purpose of the survey was explained at the regional meetings as well as through a letter sent by the Commissioner inviting school RTI teams to complete the survey. The survey results were organized into the nine superintendent regions with a total of 133 schools responding (approximately 20% of all schools). In comparison to a similar national survey conducted around the same time, Maine was performing at a much lower percentage of established RTI practices in almost all areas. An exception was noted where the Maine schools ranked themselves higher in level of staff training. The leadership team carefully analyzed the survey results and put forth the following recommendations for Maine: (1) capitalize on the strengths that are evident in the areas of Leadership and Teaming, (2) focus efforts on strengthening Tier I implementation using the Common Core, and (3) build an infrastructure of support. The team further highlighted the second recommendation as the primary objective over the following two years (2010-2012). The view was that once substantial progress was made at the Tier 1 level, the focus could shift toward Tiers 2 and 3.

***Implementation Timeline and Activities (May 2010 —June 2013).***

Following these initial trainings and the collection of implementation surveys from schools, the MDOE continued its work on the implementation of RTI throughout 2011 and 2012. Specifically, MDOE staff collaborated with RTI experts from the NCER to develop a statewide conference on RTI best practices. This conference, titled “Experts Down the Hall” was designed by a group of school-based stakeholders and was attended by 250 educators in October 2012. This conference, while well attended, was not universally commended by the experts

interviewed. Specifically, two individuals noted that the conference did not reflect RTI's requirements for presenting adequately supported evidence-based practice. During this same time, the MDOE also produced an RTI Implementation Guide and created an MDOE RTI website to assist schools with their implementation of the initiative.

***RTI Snapshot 1.6—Strengthening Tier 1***

Corey, a 7th grade student at Newman Heights Middle School, has a high number of office discipline referrals (ODRs) for externalizing behaviors (e.g., fighting, noncompliance, vandalism) since the beginning of the school year. It is now the first week in December 2012 and the incidences are increasing in frequency and intensity. The school adopted the Positive Behavior Intervention and Supports (PBIS) framework last spring and began implementation in the fall. Additionally, they are using the School Wide Information System (SWIS); a web-based application that will help them make good data based decisions about behavior. For the first time, the school will be implementing a screening tool called the Behavior and Emotional Screening System (BESS) in January. Corey's teacher, Mr. Heath recommends that Corey receive a Tier 2 intervention for his behavior. The assistant principal explains to Mr. Heath that the emphasis is on establishing Tier 1 this year before even considering Tier 2 or 3. He further explains that effective RTI implementation will take three to five years. He acknowledges Mr. Heath's concerns and reassures him that, "We are all in this together. It is going to take time and patience." He then directs Mr. Heath to the existing discipline policy for addressing Corey's problem behaviors.

**SUMMARY OF INTERVIEW DATA.**

Following the interviews with six RTI experts, responses were categorized under five areas: benefits/costs of RTI, criticisms/drawbacks of RTI, facilitators to implementation, barriers to implementation, and suggestions for future implementation of RTI in Maine. A summary of these findings is included in the following section. The complete notes from these interviews can be found in Appendix A.

***Potential Benefits / Costs of RTI.***

Universally, these experts stressed the opinion that the benefits of high-fidelity RTI implementation in schools for students, teachers, and parents greatly outweighed the costs of implementation. The primary reason to implement RTI / PBIS is to improve student learning and behavioral outcomes through more differentiated instruction. All of the experts agreed that effective RTI implementation improved outcomes, but stressed that it was not only beneficial for students who were struggling, but rewarded higher-achieving student in equal measure. One expert stated:

Done right, it further enhances programs for children who are on grade level. It creates more opportunities for children to advance in the curriculum. For example in one school, children have 80 minutes of math every other

day, on the alternate days they have RTI groups where they get specialized math instruction at their level. For lower achieving students, they get extra instruction to address deficits. For advancing students, the teacher can accelerate instruction using other tools such as Kahn Academy and other resources and approaches such as project based learning.

The experts noted these benefits are not limited to academic acceleration:

Teachers see that students are motivated when their progress is shared with them. Once teachers know how to interpret the data, they feel empowered to make decisions in purposeful ways. Parents like the idea of having the supports for students in place in a systematic way.

In general, the experts interviewed discussed few, if any, substantial drawbacks or real costs associated with RTI implementation in schools other than the time and effort required by teachers in some situations. Specifically, the implementation of RTI practices at times requires educators to adopt evidence-based instructional practices, or more substantially, to discontinue certain methods and approaches. The greatest “cost” arises in cases where teachers must substantially change the curriculum they use, their instructional practices, or both. A summary of the major benefits and costs discussed by the experts interviewed is presented in Table 1.

Table 1: *Potential benefits and drawbacks of RTI / PBIS*

	Children	Teachers	Parents
Benefits	Increased differentiation	Increased instructional time	Increased student achievement
	Less time “failing”	Increased student achievement	
	Increased learning	Fewer behavioral interruptions	Fewer behavioral referrals
	Increased time on task		
Costs	None stated	Changes in school schedule	None stated
		Time learning instructional approaches	
		Prioritization of RTI over other school initiatives	
		Elimination of non-evidenced based practices	

***Facilitators to Implementation.***

The experts observed that there were a number of specific characteristics of districts / schools that had successful implementations of RTI. These facilitators included administrative support, teacher buy-in, the consistent use of protocols, and the use of evidence-based measures for assessment. Other facilitators included a level of flexibility on the part of teachers, students, parents, and administration and a willingness to entertain and implement structural changes in

the school such as a modified schedule, alternative curricula, and new assessment procedures. Additional facilitators cited by these experts included the commitment to ongoing, coordinated professional development and professional learning communities where educators focused on the function of schools as places that support the needs of children first. A final facilitator cited by each of these experts was the need for coordinated, on-going support at the state level for schools implementing RTI. This support might include training on progress-monitoring and/or screening measures, professional development on new curriculum materials, training on new technologies, or facilitation of professional learning communities.

### ***Barriers to Implementation.***

The barriers cited often reflected the absence—or opposite—of the facilitators mentioned above. Specifically, the experts interviewed described school implementations of RTI where these barriers prevented full implementation, created inefficiencies, or actively worked to divert the initiative. In schools that lack administrator support, teachers may find it difficult to institute changes to the schedule, adopt alternative curriculum materials, or engage in ongoing professional development to support the initiative. Likewise, a lack of teacher buy-in may prevent the best efforts of administrators to put RTI practices into place. In short, both groups must agree that the implementation is a priority.

Nevertheless, personnel buy-in alone may not be sufficient. In addition, our experts noted that other barriers might prevent meaningful implementation of RTI in a school. Other challenges included the willingness of educators in the school to abandon assessments, curricular materials, and instructional practices that are not evidence-based. It is also the case that RTI implementation may fail if the implementation attempts to institute new practices while simultaneously maintaining all its old practices. For example, a school that attempts to institute RTI planning time for teachers without changing the school schedule may be forced to schedule a large number of early-release days; a policy that is often unpopular with parents. These types of situations cast RTI implementation in an unfavorable light and result in members of the school community being critical of the effort.

A final barrier noted by all the experts interviewed was the present lack of state level coordination for RTI. Early efforts brought about substantial progress, including a comprehensive set of resources compiled on the Maine Department of Education website. These resources closely mirror those found on the National Center for Response to Intervention, and clearly lay out the elements of RTI, strategies for implementation, and tools for measurement. While the present statute and the MDOE's web-based resources are positive and important steps in the implementation of RTI, the experts interviewed suggested that they were not sufficient to ensure that Maine schools comply with the regulations and institute RTI practices with fidelity. Rachelle Tome, Chief Academic Officer for the MDOE, noted that the current implementation of RTI was not consistent, but there was no way at present to estimate the exact levels of implementation. She further noted:

What gets measured gets attention. Right now, there is no systematic way for a district to be measured [in order to determine] if they were in compliance with the statute. We are explicitly including expectation for components of RTI as a part of the ESEA waiver, and for those schools that received a D or and F – and there are 3 questions that directly address whether they have a system for identifying children, do they have a system of supports, and do they have a system of progress monitoring tools. A number of the schools that are underperforming have indicated that they do not even have the first element in place. I can't give a precise proportion of schools that are missing these elements because we are still in the process of collecting this information<sup>1</sup>.

***Of all the barriers mentioned by these experts, the lack of a statewide approach emerged as the most significant obstacle to greater implementation of RTI practices in Maine schools.*** CAO

Tome's observation that there presently exists no mechanism to measure or monitor implementation underscores the need to understand the current level of implementation.

As noted above, we did not attempt to survey all the school RTI teams in the state for this report because of the complexity of measuring RTI implementation fidelity, and the lack of an identifiable individual who has primary responsibility for the implementation of RTI. The experts noted that schools should complete the RTI implementation survey (See Appendix B) in order to accurately determine implementation fidelity.

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<sup>1</sup> Quoted by name with permission.

Table 2: *Potential facilitators and barriers to RTI implementation*

Facilitators	Barriers
Administrator buy-in at the school and district level	Lack of administrator support at either the school or district level
Teacher buy-in	Lack of teacher support
Consistent use of protocols	Variable use of protocols
Effective and efficient use of evidenced-based screening measures	Use of inappropriate measures for Universal screening (such as diagnostic measures, and non-evidence-based assessments)
School-based coaching & peer support	Lack of common planning/collaboration time
Flexibility to change school policies, structures, and schedules	Unable / unwilling to modify school schedule to permit differentiated intervention time/common planning time.
Focus on the purpose of schools as places that support children	Focus on the purpose of schools as places that serve communities, parents, teachers
Adopting evidence-based curriculum & instructional approaches	Continued use of non-evidence-based approaches due to tradition.
Acceptance of change	Resistance to change
Commitment to coordinated ongoing professional development	Superficial and/or disjointed professional development
Coordinated support at the state level	Lack of ongoing support at the state level.

**FINAL POINTS FOR CONSIDERATION.**

While there is currently no definitive data to estimate the number of Maine schools that have high quality RTI implementations, there is broad agreement among the experts we interviewed that the overall implementation of RTI can be significantly improved. High quality RTI implementations are not easily accomplished and often require significant effort by educators to be successful. The primary cost associated with RTI is the time required for teachers to adopt new practices and learn new procedures. There are, however, clear guides to accomplish this work and Maine may learn from the best practices of states that have already implemented statewide RTI systems of support for academics and behavior. Schools and districts can find such information through the National Center for Response to Intervention and the Maine Department of Education; however, there is presently no plan to replace the outgoing RTI coordinator at the MDOE. Furthermore, while there is presently no active RTI council meeting

in Maine, such a group has previously advised the MDOE and Maine schools about emerging best practices in RTI in Maine and around the nation. Should MDOE or school districts be interested in expanding or strengthening the use of RTI in Maine schools, re-establishment—either formally or informally—of an individual RTI coordinator and some type of RTI advisory group may serve as a next step.

Disclosure: While this report makes every effort to provide an unbiased, accurate account of the effectiveness of RTI and its use in Maine, it should be noted that the authors and key contributors have extensive background in providing and supporting RTI services in Maine.

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## APPENDIX A: INTERVIEW NOTES WITH MAINE RTI EXPERTS

### Interview with Rachelle Tome, Chief Academic Officer, Maine Department of Education

Can you briefly describe MDOE's work around the development of RTI?

I was on the steering committee, we developed the framework and is on the department's website. As a part of that work, we developed guidelines and strategies that tools could use. There was a lot of confusion that this was a Special Education regulation, and a device for SPED referrals. We did develop a variety of tools, resources, and other materials on the site. They also did a series of trainings for districts around RTI. That is basically the work that has been done. This is in statute. Schools were to have a RTI plan in place for the fall of 2012. They did do a survey of needs to get a sense of where they were in the process, in order to determine what support the department should provide during this implementation survey. Elementary schools appeared to be far more capable of adapting to an intervention model, but the higher up in the grade levels we got, the more difficulty they school had implementing an intervention model. *At the root of all of this is a lack of understanding that the classroom is the first line of intervention.*

What is the current status of this initiative?

What get measured gets attention. Right now, there is no systematic way for a district to be measured if they were in compliance with the statute. We are explicitly including expectation for components of RTI as a part of the ESEA waiver, and for those schools that received a D or and F – and there are 3 questions that directly address whether they have a system for identifying children, do they have a system of supports, and do they have a system of progress monitoring tools. A number of the schools that are underperforming have indicated that they do not even have the first element in place. I can't give a precise proportion of schools that are missing these elements because we are still in the process of collecting this information. This seems to be particularly true at the high school level. Part of the true intent of the grade system is that there has been no accountability system from the state. The presence of a RTI system will be part of that accountability system – at least for Title I schools. This will be done through Indistar (Academic Development Institute, based on work by Sam Redding), an online tool that has a set of indicators that measure school performance. The schools and the MDOE can see progress on specific indicators. We followed the lead of Virginia who added three questions about the presence of RTI.

What opportunities do you see for moving this work forward?

As we are working with re-focusing how the department does its work. We are working on a framework that is much more inclusionary. Right now the conference we do are more focused, and there has not been any focus on providing supports for students who are struggling. For example, if we do a workshop on literacy, that we provide a series of trainings for regular educators on the use of assessments, strategies, and approaches that support struggling learners in the regular classroom. This way teachers hear more about ways to support children in the regular classroom using interventions and supports. Having a more inclusionary model in the professional development approach will help promote this. We can then provide supports to schools that are based on the supports that school needs.

What barriers may preclude this work in the future?

People still don't understand that RTI is first and foremost a classroom-based intervention, which means a change in your practices as a teacher. We see this in the trainings, where people go to trainings, and then go back to their classrooms and do the same things they have always done. In order to have real change there has to be ongoing support for those teachers – the leadership in the schools have to maintain training, supports, and develop an understanding themselves. They have to lead the teachers to review the data, look at student progress, and how to lead the people in the school to provide those supports. I don't know what kind of explicit kinds of trainings we did with leaders, but I do know that if it's inherent in your belief system then you going to do it, but even with a state statute you are likely to do what is required and move on.

Will the department be coordinating a statewide effort around RTI?

In as much as we can with our new delivery model. As we re-focus our work, and our focus on priority schools, and the other piece we are building is our statewide system of support that we are using. We have been more scattered, but we are trying to use the regional supports that are in place (for example, CASE in Aroostook county) so we are trying to develop a more regionalized model that is adapted from the work in the SPDG project. It will be embedded as a component, not as a stand-alone training. It is an integral part of the work what we do, not an add-on. One of the topics that we are looking for in the promising practices is the inclusion of RTI in the school. How can we share what they are doing and scale it up? There is the myth that RTI takes a lot of money --yes it takes time—but not always money. To the extent that there needs to be oversight and

monitoring, there needs to be staff that can provide that oversight and/or support. For example, we know that they all get PD money, but how are they using that money?

June 25, 2013

1) Can you briefly describe MDOE's work around the development of RTI?

In 2008, there was a group of department personnel who went to a conference to educate themselves. When they came back, they enlisted the help of the National Center for Response to Intervention (NCRTI) and a task force was created to move the work forward. This group met every few months. The NCRTI gave MDOE a grant to have the National Educational Research Collaborative (NERC) come in and help facilitate the meetings and the work. Vicki Horne from NERC came in to help with this work. In 2010, there were several developments in the RTI work in Maine. First, a RTI readiness checklist was developed and sent out to schools. Next, there were numerous trainings throughout the state to help schools understand RTI. From Ludbec to Madawaska, to Kittery to Rangeley. There were after school trainings provided by about 10 trainers. It was all well designed, but it was not well attended at most of those meetings. The intent was to get out the basics, and then pull together a group of practitioners to find out what was working. That was in the spring of 2011. At the end of 2011 (with Rachel Brown leading it) did a RTI academy. One of the challenges was the funding to attend the academy. It was well run, great workshops, etc. but the attendance was poor. When Barbara Moody left the MDOE in her position as the RTI coordinator, we were struggling a bit about where we needed to go. The return rate from schools on the RTI checklist was not great. So when I took over this project in the fall of 2011, there wasn't much happening. No one was really doing anything with it in the department. Barbara Moody was being paid to do RTI, but the person who replaced her didn't have any background in RTI. The people in the schools were totally frustrated because this was a mandate but there was no support. At the time I was working as a consultant with schools. Someone had to take the reins, so with another MDOE staff person's help and the help of Sylvia DeRuvo who was working with RTI in the NERC we began working on RTI again. Sylvia and I sat down and planned a day in February of 2012 to discuss RTI with as large a group of stakeholders as we could gather. We had 65 people from all over the state come to Augusta to discuss the implementation of RTI in Maine. We got a lot of classroom teachers, administrators, and parents. Instead of a formal needs assessment, we had them rotate in groups and had them provide input from the schools, and we had Don Siviski, talk about how RTI could be integrated with standards based education. Sylvia, Susan and I each led one of those groups. One group talked about the fall conference, the second was discussing the RTI guide, and the third was to discuss the RTI website. The concept was to have the fall conference ready with all of these components and to have it ready for schools to use. The conference was titled "experts down the hall" we had no national speakers, and this was unique. We had about 250 people come for the conference on October 29<sup>th</sup>, 2012. We started the conference with students and then moved to the school-based people talking about what worked for them. So there was a lot that was accomplished on the implementation of RTI between 2011 and 2012: the guide, the conference, and the website. These things are still all there for people to access.

2) What is the current status of this initiative?

It really became part of the bigger picture of standards-based learning. As the department moved into the area of standards based learning, it was important to look at how to integrate RTI into that. It was important to educate the leadership here about how to do that. The current vision for the work at the department is shown in the DOE strategic plan for "putting learners first" the DOE strategic plan articulates the vision for the department.

*Probe: Do you see any discontinuity between this vision and the implementation of RTI?* I think there is even a bigger picture than the DOE vision that addresses the climate and culture. For example there is nothing in the DOE vision that specifically mention multi-tiered systems of support, and in RTI there is no mention of community supports which is mentioned in the DOE strategic plan. However, there is nothing in the strategic plan that runs counter to RTI and vice versa.

3) What opportunities do you see for moving this work forward?

I can't answer – the current leadership at the department are the ones that need to address this. The simple answer is however RTI fits into the strategic plan and standards-based learning.

4) What barriers may preclude this work in the future?

I think that the missing piece, that could be a barrier, both nationally and within our strategic plan and our state effort is student voice. It needs to be in the forefront, and not as a mention on a website. When you include youth voice, they feel more valued, empowered and connected in schools. Any efforts the department makes to ensure that get more than lip service and is a priority.

The other priority is to make sure that climate and culture are addressed because those are things that make schools a place that make all students more successful. These are the things that make all schools more successful. There is 25 years of research that demonstrate this.

The changing of the acronym – schools perceive that the Department of Education changes it's priorities every four years. A barrier is to help schools see the connection between the initiatives in the department, and the benefits to them and to their students, then they are less likely to change.

5) **Will the department be coordinating a statewide effort around RTI?**

I can't answer this one. Only those in the current leadership can do that. There is, however, currently not a position or plan to coordinate or provide consultation on RTI for the department.

## Interview with Rachel Brown, Associate Professor, University of Southern Maine

Tell me about your involvement with RTI in Maine?

It goes back to 2004 Dr. Brown wrote to commissioner Gendron, that Maine's approach to providing services to children with disabilities. She was appointed to a task force to address needed changes in the Chapter 101 Regulations. She advocated for a prevention-based approach to helping children, and help prevent too many children from being identified for special education. That group then created the specific steps that Maine has in regulation that require students go through a specific set of steps before they were placed into special education. This is referred to as pre-referral in the regulations. This may have meant that people interpreted this as just a hoop to jump through to place children into RTI. Barbara Moody at MDOE contacted her to engage in some work related to a grant from the national RTI center for Maine. There was a renewed effort to develop training materials for the MDOE, including a webinar, a training DVD, and trained trainers who in turn went out the 16 regions in the state. The approach allowed schools to have a large degree of flexibility in the implementation. By 2010, the dissemination was (essentially) complete. The implementation across schools was highly varied. The RTI academy was set up at USM in the summer of 2010. This was to provide more detailed training. They had about 50 participants. There was some conflict at this time, as there was another group that did some work (Syntiro). They (Syntiro) were doing work in the name of RTI, but these trainings were not really RTI, nor were they research-based. The RTI coordinator left the department of education, and was replaced by another department employee. She went to meet with the new commissioner [Bowen], to discuss RTI. In that conversation, Dr. Brown stated that the commissioner suggested that the answers to the problems in Maine schools were already in Maine schools, and her interpretation was that these external sources, especially those of University people, was discouraged. She did not have any subsequent requests for input from the Commissioner following this meeting. Dr. Brown's noted that during 2011-2012 the department pursued the MCL approach. At that time, Rachel and others attempted to alert the department about the lack of evidence about MCL.

Fall of 2011 there was a final conference held. "Experts down the hall" where Dr. Brown noted there was a complete disregard for the evidence-based practices that would require more significant instructional changes.

What districts / regions have you worked with?

She began work with the Gorham schools in 2004, and they could revise Tier 1 practices: Windham, Kennebunk, Portland, SAD 1, Easton, PREP, RSU-04 (Litchfield, Sabbathus, Wales). Lewiston has done quite a bit of work on PBIS. SAD 10, SAD 6

*What do teachers, and parents say are the greatest benefits of (RTI / PBIS)?* Early intervention. Getting help right away. It's powerful, because we can say to parents that we see an issue, and we are going to do something tomorrow. The student does not have to keep failing – they can be successful. The apprehension among teachers has increased, in large measure because of the specter of teacher evaluation. There is a wider acceptance that children need direct instruction. Children who move frequently and have large number of absences are at the greatest risk. In some cases, RTI can help, but it is not always effective in these cases. At the end of the day most teachers think this makes sense, that instruction matters.

*How does this benefit other students who may not be at risk?* It benefits all students if it's done right because it places the responsibility on the educators in the building to provide effective instruction for all children. One there is a system that has universal screening, you can identify high achieving children as well. You can then provide enrichment to all students. This requires time and energy, and the most difficult part is to change the schedule. Often school schedules are set up for the benefit of teachers not students. That needs to change if we want to improve instruction and outcomes for children.

*Do you have any specific success stories you can point to? Why were they successful?* RSU 04. For several years running, they have managed to get every kindergartener on district benchmark for reading readiness by the end of the year. All of the districts have seen a reduction in the number of special education referrals. Her PBIS colleagues find the same thing. By improving outcomes, they can benefit all kids.

*Do you have an example where schools were not successful in using PBIS / RTI? Why did that happen?*

*What are some specific opportunities and barriers to implementation you have seen?*

See opportunities and barriers below.

*What are the opportunities for successful RTI implementation?*

Necessity is the mother of invention. Some of the poorer districts are more welcoming, because they accept that they need help. Wealthier districts are less welcoming, and want to put forth the image that they have everything worked out. Leadership can create a great opportunity. (or the converse)

*What are the barriers to RTI implementation?*

Teachers understanding of what is research and what evidenced based practices. A common understanding that schools are for children not teachers. Overcoming the idea that things that are free (like CBM) could be good. Educators' resistance to change. Support for ongoing professional development. Adequate resourcing (in terms of dedicated staff PD).

*What is the difference between RTI and MCL?*

Research. RTI is built on a foundation of empirical research. Every piece is built upon a solid, replicated research base. I know of no empirical research that supports that approach. In fact there is a wealth of evidence that refutes that approach. Specifically, there is study after study shows that computers cannot replace teachers. Therefore, effective instruction requires highly trained teachers to guide students. One analogy is would you go to a heart doctor who did not graduate from an accredited medical school and complete a cardiac residency.

*What are the criticisms that applied to RTI / PBIS.*

It uses the standard protocol approach as the standard for all children. It is not going to meet the needs of all children immediately. However, these children then move on to tier 2, or 3 as needed. That there is a value set attached to the PBIS work. For example, the tolerance of homosexuality may not be a value adopted by some families.

*What specific strategies would you recommend Maine consider as it continues this work in the future?*

Embrace a statewide approach to making RTI accessible to children in all schools. Invest in professional development for teachers. Without a statewide approach, there will be a lot of children left out. Do not re-invent the wheel, there are models in other states (e.g., PA) that we could adopt. It's not about the money, it's about the will.

## Interview with Karen Smith, Instructor of Special Education, University of Maine at Farmington

### *Tell me about your involvement with RTI in Maine.*

During the fall of 2007, Ms. Smith and a fellow UMF colleague conducted a brief presentation on RTI to the rest of the faculty in education, which mainly reviewed IDEA. Ms. Smith took a course with Lee Goss at USM in spring of 2008 -- that gave her an in-depth exploration to the topic of RTI. In that setting she learned about the RTI framework. At that time she began to work with Lucy Mallor and trained with her special educators to learn what RTI is. She also did universal screening and progress monitoring training. She worked with another school as well. She worked with the K-6 planning group in that school setting to work on the exploring and adopting and then to planning and implementation. Since that time she has specifically worked with the Middle School. Their first year for implementation for literacy was 2010-11 and then math in 2011-2012. They then worked with Dr. Cavanaugh on PBIS in 2012-2013. She also worked with other schools, one of which made the choice to start with behavioral supports so she turned them over to Dr. Cavanaugh. In multiple schools in that district she trained educators on universal screening and measures. She also worked with a smaller group of teachers in that district on progress monitoring at the Tier 2 level. She also did a year-long monthly training series with para-educators on an overview of RTI and the specific components (e.g., screening measures, progress monitoring tools, and specific approaches / protocols for behavior).

### *What districts / regions have you worked with?*

#### **What were the opportunities and barriers in each?**

School A (K-8 School): **Facilitators:** the expertise of the Special Ed director and that person's knowledge of evidence based practices and a complete understanding of RTI in general, but also of specific interventions for targeted needs, and the process of screening, progress monitoring, etc. **Barriers:** the director was "on her own island" and did not have the support of other administrators. There were also some staff who were resistant, but the major barrier was the lack of support of other administrators.

School B (Middle school): **Facilitators:** the overwhelming support from the Principal / AP and has made a large difference in the staff buy in. The school philosophy is consistent with the RTI approach -- once they realized these approaches were symbiotic things went much more smoothly. They now have both academic and behavioral supports up and running. **Barriers:** Making sure they have access to expertise, and the time required to do the work.

School C (High School): Has not really been successful. **The Barriers:** were a lack of support from the administrators, who did not understand RTI, nor did they try to learn about RTI. They were a failing school, they took a large sum of CIPS money and quickly implemented a large number of initiatives with very little coordination. In addition, there has been substantial turnover in administration, and have far too many initiatives going on simultaneously.

School D: (High School): **High School: Facilitators:** The principal is very thoughtful. They are ready to implement PBIS next year. That will likely build confidence for them to implement academic supports. The principal was wary of instituting RTI at the high school level (in part) because the lack of research about RTI at the high school level. They do have teacher buy in and administrator support **Barrier:** They have adopted MCL which is not going to help them implement RTI.

### *More generally, what are the opportunities and barriers you see in your work with schools?*

#### *Opportunities:*

The leadership has to have buy in and a clear understanding of RTI. Believing that all students have the capacity to learn, and if they are not responding educators ask "what do we need to do differently"

Getting parents and the community school board involved in understanding RTI. There is staffing and resource allocation, this needs the support of the school board. When the school goes to the school board for support, a complete understanding of the initiative will create greater support for that work.

#### *Barriers:*

Ignoring evidence based practices. They are going to continue to use the programs and strategies that they have been using. For example, they are using the DRA as a universal screen -- the result is that they are over-assessing. As a result of this over-testing, teachers are overwhelmed, parents are complaining of lost instructional time. To accommodate, they have hired subs so the classroom teachers can conduct the assessments, and have implemented 17 early release days. They have implemented RTI but they have not let go of existing practices, so that they are implemented but in an inefficient way.

Blaming problems on sub-groups of children. Another issue is that they are too focused on a single approach. If the student is not responding, then the issue must be with the student not the specific intervention.

Competing demands for the philosophy around reading instruction and addressing students' needs. Because of their assessments they result in a number of false positives (and false negatives). This leads to a lot of extra work. As a result, they are not trying other approaches when the student is not successful. As a result children are not making adequate progress.

*How does RTI implementation differ at elementary, middle, and high school levels?*

From my experience, the middle school level where they have the actual middle school concept (schedule, etc.) RTI fit -- it was the plate for them. It gave them a systematic focus where they could really use data. At the elementary level, we know that RTI has had more success. There is a lot of research at that level. At the high school level, there is less research (for Academic) and instituting PBIS may facilitate implementation of academic RTI.

*What do teachers, and parents say are the greatest benefits of (RTI / PBIS)*

Teachers see that students are motivated when their progress is shared with them. Once teachers know how to interpret the data, they feel empowered to make decisions in purposeful ways. Parents like the idea of having the supports for students in place in a systematic way.

*How does this benefit other students who may not be at risk?*

Done right, it further enhanced programs for children who are on grade level. It creates more opportunities for children to advance in the curriculum. For example in math, children have 80 minutes of math every other day, on the alternate days they have RTI groups where they get specialized math instruction at their level. For lower achieving students, they get extra instruction to address deficits. For advancing students, the teacher can accelerate instruction using other tools such as Kahn Academy and other resources and approaches such as project based learning.

*What is the difference between RTI and MCL?*

MCL is neatly packaged, and on the surface it sounds good. Lacking in that [MCL] approach is the accountability piece. Therefore, RTI puts the teachers under the microscope, whereas MCL does not make teachers accountable to the same level as RTI. MCL doesn't mention anything about assessments, but states that teachers should meet every student at their own level. It doesn't mention any specifics. The idea is that MCL will meet every student at their learning level, but that takes the responsibility away from the educators -- in that it doesn't address why that student is at that learning level. It may inadvertently create the mindset where teachers meet students at their level -- where students are at a level of instruction because that is their capacity for achievement not because of inadequate instruction. This may preclude educator from accepting responsibility for providing effective instruction.

*What are the criticisms that applied to RTI / PBIS?*

At the beginning stages of implementation educators will say that it is another bandwagon, that it's another state mandate, that it involves too much testing, and that it's not clear as a product.

*What specific strategies would you recommend Maine consider as it continues this work in the future?*

There needs to be a statewide support for RTI. The present DOE activities do not appear to support RTI or promote it. Some schools were doing a lot of good work, so when the department shifted focus away from RTI, so did those schools.

## Interview with James Artesani, Associate Professor of Education, University of Maine

### *Tell me about your involvement with RTI in Maine.*

My involvement is on the behavior side of the triangle. Worked with close to 100 schools, providing on site PD and technical assistance. Owen Maurais and the PREP group asked for summer workshop, where Positive Supports was the framework for the workshop. Lee Goss also did the academic side of things. They then did follow up training days in the fall. Most of the PREP districts participated. Jim also met with the leadership teams to check on the implementation. The following year there was a grant from the MDOE to expand these trainings. Jim partnered with the MSN to provide these trainings in the Aroostook, North-woods, Midcoast and Washington counties and the Ellsworth RSU participated. He did workshops in those regions (4 per year, and then at least 2 followups in each region. Since May of 2012 the grant ended, and Jim has continued to work with PREP schools and a few others that privately contracted to continue PD. He also worked with faculty from UMF to create the UMSPBIS to promote PBIS statewide for the last 4 years. They have formal approval from the UMS and from the Association for Positive Behavior Supports – there are only 13 affiliate networks, and Maine is one of those. They run a state conference every year, where they invite some of the top experts in organizing state approaches to behavior support implementation. The Maine DOE has never attended, although they have been invited each year.

### *What districts / regions have you worked with? See above*

*Follow up:* what stages are they at? Most of the schools are elementary, and some middle schools, and fewer high schools. There is specific data statewide for those implementations – but only for schools that they have contact with – because there is no statewide framework, there is no reporting mechanisms. Jim shared concerns that the schools in Maine are likely to not be implementing after the end of the regional supports – but noted that other states that have a statewide system do not have this issue.

*How does this differ between elementary, middle and high schools? This may be especially apparent in the K-3 levels. More elementary schools are implementing. IN part, this may be because they are less complex organizations, and they see their roles as being more directly tied to behaviors of children. Because this is a school-wide effort, there is also a great ability in elementary schools to approach this in a coordinated way.*

### *What do teachers, and parents say are the greatest benefits of (RTI / PBIS)*

What I heard from teachers and administrators, is that it allows them to build consistency. There are the same behavioral expectations, people are using the same language, that consistency is one of the major benefits. They like the fact that it is evidence based, and that if they commit to it, they will have success. They also see the link between the behavioral and academic arenas. They are building a system, rather than trying to put out fires. The system supports the staff behaviors and practices. Helping staff focus on the practices that help to support the students – the data supports interpretation for both. Parents also report that they appreciate the consistency, when they talk with people in the school, they know that everyone in the school is speaking the same language, and may help to lessen the adversarial nature of these interactions. The parents can see the school doing something tangible about school climate. There are some schools that are doing an especially good job with the parent connections.

### *How does this benefit other students who may not be at risk?*

The focus of this work is on prevention – and because you don't know which children may be at risk, they are all primed to be more receptive to intervention and be identified at an earlier point in time. You will be more aware of behaviors and academic progress which children are at risk – you can pinpoint where behaviors are coming from and you can be more accurate in identifying those sources. This is about changing school climate, when the work is done at Tier 1, because when there are fewer students who are exhibiting problematic behaviors at Tier 1, with fewer children at Tier 2 and 3. The prevention oriented nature of the approach is key to making the learning environment more positive overall, and more quickly identify and meeting individual student needs. It is also useful in identifying school wide patterns – for examples shifts in the number of behavioral problems adjacent to vacations. In response the school included a re-emphasis of school expectations at these times. The school reported a decline in the number of behavioral issues during these time periods. In RCT, they are showing a positive effect for academic achievement. One teacher commented, "You can't see PBIS as another thing on the plate, it is the plate."

*Do you have any specific success stories you can point to? Why were they successful? Central middle school has been very successful. Right from the start they had 3 regular education teachers who helped establish a PBIS leadership team – and they have stuck with this for 4 years. He has done repeated observation to monitor for fidelity of implementation. They had the involvement of the middle school principal. They used all of the protocols and did not skip any steps. They measure their implementation and continue to follow the checklists and protocols. The other critical factor was the presence of the central administrator (Special Education director) has attending all of the trainings from the start. She uses a portion of the 15%*

allocation for PBIS. They also use data on a weekly basis. They look at individual student and school-wide data. There is a high fidelity of implementation of a research-based process that is sustained over time.

*Do you have an example where schools were not successful in using PBIS / RTI? Why did that happen?* Schools that go into this and are not successful usually approach it as a behavioral intervention plan. There is a limited number of people who get involved, they don't have administrator buy in, and they don't use a data system that does an adequate job of helping them monitor patterns and trends. There has also been a loss of state support after 2 years – since this process takes 2-4 years to complete, many schools were just beginning to implement this and then stopped. When you see an ineffective implementation, you see a lack of fidelity. Often the efforts of sustaining are not present – key individuals leave, and the implementation is weakened.

*What are some specific barriers to implementation you have seen?*

The state department does not discriminate between evidence based and non evidence-based practices. Therefore, alternative approaches that have no data to support them, are funded equally.

Administrator buy in

Regular educator buy in

Length of implementation

Ongoing professional development

Adequate resourcing (in terms of dedicated staff PD)

*What is the difference between RTI and MCL?* I have never seen any research for MCL. Whenever people can't "manualize" the process, I am suspicious that it is not an evidence-based practice. My fear is that there will be a higher number of children who will need Tier 2 (and above) supports because there is a lack of instruction for children at emergent levels. RTI is by definition something that impacts all children all of the time, because there is never a time where children are not served by RTI / PBIS.

*What are the criticisms that applied to RTI / PBIS.*

It's too behavioral. It's based on ABA, (*but it also borrows from social learning theory. Part of this is the result of who has more evidence.*) The behavioral part of this focuses on observable behaviors. *Others focus on lagging cognitive skills, however, these may not be observable, then leaves that determination primarily to speculation.*

Philosophical differences, that people cannot be quantified, and people's actions cannot or should be shaped through a behavioral feedback loop.

*What specific strategies would you recommend Maine consider as it continues this work in the future?*

Dean Fixsen's book on implementation science. UNC. This is the implementation science that undergirds the implementation of RTI. Do this in a limited number of schools where the process can be implemented fully. Schools have to fully agree on participating.

Look at the evidence base on RTI, PBIS, and Implementation. Also review the empirical evidence base for alternative approaches (i.e., scholarly research publications using a rigorous research design showing moderate effect sizes). For example, the state announced that Ross Greene's Collaborative Problem Solving was a data-driven, research-based model, however, there is no empirical data on this model in schools. There was one study that showed positive effects in a prison.

## Interview with Brian Cavanaugh, Assistant Professor of Education, University of Maine Farmington

*Tell me about your involvement with RTI in Maine.* Dr. Cavanaugh arrived in Orono in 2009 under Dr. Jim Artesani who was working to complete the trainings. He worked with Jim doing these trainings. He also did some research of the implementation and what challenges that they found implementing PBIS. During the last two years he has focused on central and western Maine in 10-12 schools.

*What districts / regions have you worked with?* RSU A – Fully implementing at the elementary, middle school is finishing first year, the high school will be implementing next year. They have been successful because they have taken a district wide approach. It's not just getting money, but the time, if the central office doesn't recognize the importance of the PBIS work. This district is a good test case of what this could look like district-wide.

*Why were they successful?* They have gotten outside facilitators, they have invested in the data system (SWIS). They have also hired a district-wide behavior specialist who spends a great deal of time working with the PBIS teams. This is all happening because there is a Special Ed director and curriculum coordinator that understand PBIS, and understand how to facilitate the implementation of it. They have moved to trained in-building coaches (who are also regular teachers) that can support their peers in PBIS. Even though the superintendent doesn't work directly, that person has supported the district with time and resources. Early on, these schools had another outside facilitator, and early on there was not staff agreement to do it. I don't work with the schools unless the school votes to do it with at least 80% buy in. I think the schools that are not as successful didn't get that staff buy in up front. Staff buy in is critical. If the staff votes, it's because the administrator wants it done.

*What about other schools you have worked with?* In RSU B they had a large grant a few years back, so they are fully implementing also I am working with School 2, that has been working with them for several years, and both the principal and the district level administrators are supportive of it. School 3 is fully implemented but there is not district level support for it. The district didn't allocate the time or resources to support it, School 4 (and their district), Starting in the summer, will work with two other communities. In schools where there is strong buy in, then there is success in working in that district.

*What do teachers, and parents say are the greatest benefits of (RTI / PBIS)*

There is a middle school teacher who worked for 25 years, and she feels it has completely changed the climate of her school. Climate is a big thing that changes.

Consistency: students and staff understand the expectations

Schools that are high implementing are seeing improvements for children that have had chronic issues in the past. Those students are not getting discipline referrals.

*How does this benefit other students who may not be at risk?*

School climate improves.

Teachers recover instructional time because they are not dealing with behaviors. On average, 6 days of instructional time.

Greater consistency across classrooms for all children

Schoolwide rewards and recognition systems recognize children who are doing the right things. (especially at the upper levels).

*What are some specific opportunities to implementation you have seen?*

Staff buy in,

Administrator buy in

School-based coaching

*What are some specific barriers to implementation you have seen?*

Lack of time to plan and think about what they are doing, and how it will be rolled out to the entire staff

Expertise. Most educators don't know very much about PBIS, this is a potential issue if this isn't present or likely to develop in the building.

Putting this responsibility on to schools. To leave this to schools doesn't make sense. Models that work at the district level or even regional level make more economic sense. There is an efficiency of scale.

State support has been lacking. There are many more schools that need supports but are not getting them.

*What are the criticisms that applied to RTI / PBIS?*

We shouldn't reward students for expected behavior.

Giving rewards decreases intrinsic motivation (Alfie Kohn) but others (e.g., Carol Dweck) disagree that this is the case.

*What specific strategies would you recommend Maine consider as it continues this work in the future?*

They should start implementing PBIS.

Infrastructure for training

Other states have 80% we have 80 schools. We are at our limit to support districts in the ad hoc way we are currently doing this.

Other states (e.g., Colorado) have recently implemented this, and have a central organization (sometimes the DOE, but more often not)

Many schools would like to implement this, but they cannot without additional supports.

Teacher preparation needs to more explicitly incorporate PBIS approaches.

When schools really get into this work, they see the value in this. It's effective in improving student behavior.

**APPENDIX B: MAINE RTI READINESS CHECKLIST\*\*\*\***

This checklist is a self-evaluation tool provided to assist schools in examining their readiness to adopt RTI practices. The checklist is intended to be completed by a team of building level leaders. It includes seven indicators to ensure successful implementation of RTI systems. This will be used to collect baseline data and as a blueprint for RTI implementation for the school.

District Name: \_\_\_\_\_

Date: \_\_\_\_\_

School Name: \_\_\_\_\_

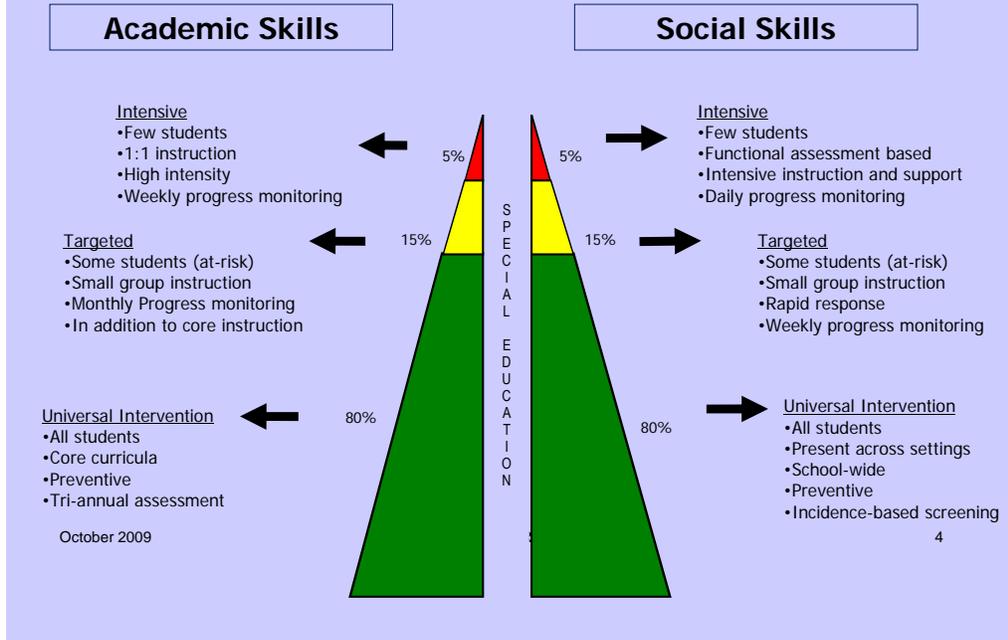
Grade Span: \_\_\_\_\_

**Staff Completing the Checklist:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

# Teaching and Supporting All Students



Leadership	Awareness	Emerging	Developing	Established
District level and building level support at the highest levels, including agreement to adopt a RTI model and allocate required resources (general education, special <u>education</u> and other programs)				
Understanding of and commitment to a long term change process (3 or more years)				
Long term commitment of resources among general education, special education Title, ELL and other programs (staff, time and materials) for screening, assessment, and interventions				
District leadership team with basic knowledge of the research relative to RTI and the desire to learn more				
Expertise at the district level and building level with respect to research based practices for academics and behavior				
Scheduling supports time allocations required for implementation (screening, data analysis, teaming, intervention planning/implementation/monitoring, P.D., etc.)				

**Rating System:**

Awareness – Some staff are knowledgeable about RTI but little action has been taken.

Emerging – True for less than 50% of staff or school

Developing- True for more than 50% of the staff or school

Established- True for 90% or more of staff or school

**Evidence:**

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<b>Teaming</b>	<b>Awareness</b>	<b>Emerging</b>	<b>Developing</b>	<b>Established</b>
Commitment to collaborative teaming (general education, special education and other programs) at both the district and school levels				
Principal leadership and staff (general education, special education and other programs) willing to participate at each school				
Willingness for general education, special education, and other programs to work together at both the district and school levels				
Commitment from all team members to making student decisions through problem solving				
Focus on student outcomes vs. eligibility (team's main purpose is not special education referral)				
Parents are notified and requested to participate in the three tier process as soon as their children go beyond Tier 1.				

Rating System:

Awareness – Some staff are knowledgeable about RTI but little action has been taken.

Emerging – True for less than 50% of staff or school

Developing- True for more than 50% of the staff or school

Established- True for 90% or more of staff or school

**Evidence:**

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<b>Curriculum</b>	<b>Awareness</b>	<b>Emerging</b>	<b>Developing</b>	<b>Established</b>
Use of a Maine Learning Results aligned, research-validated core reading program; core math program; and writing program at each elementary or secondary school identified as RTI ready with 80% success rate as determined by local, district and/or state assessments.				
Use of or ability to acquire intervention materials				
A range of research-based instructional interventions for any student at risk of not reaching potential, including those identified as gifted/talented or those already experiencing academic failure (systematic model in place such as 3 tiered approach, pyramid of interventions, etc.)				
System in place to evaluate research-based interventions as to integrity/fidelity of implementation				
Capacity to provide ongoing training and support to ensure fidelity of implementation				
Use of school-wide behavioral expectations with uniform rules and reinforcements.				

**Rating System:**

Awareness – Some staff are knowledgeable about RTI but little action has been taken.

Emerging – True for less than 50% of staff or school

Developing- True for more than 50% of the staff or school

Established- True for 90% or more of staff or school

**Evidence:**

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Use of Data	Awareness	Emerging	Developing	Established
Universal screening system, including Curriculum Based Measurements, to assess strengths and challenges of all students in academic achievement, talents and behavior				
Structured data conversations occurring to inform instructional decisions				
Progress monitoring using Curriculum Based Measurements (CBMs) or behavioral charting that is systematic, documented and shared				
Other direct measurements of achievement and behavior (learning benchmarks) that have a documented/predictable relationship to positive student outcomes (i.e., you are measuring steps to achieving a standard)				
Data management systems in place (technology support)				
Special Education eligibility determinations made using the Rtl model.				

Rating System:

Awareness – Some staff are knowledgeable about RTI but little action has been taken.

Emerging – True for less than 50% of staff or school

Developing- True for more than 50% of the staff or school

Established- True for 90% or more of staff or school

**Evidence:**

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<b>Service Delivery System</b>	<b>Awareness</b>	<b>Emerging</b>	<b>Developing</b>	<b>Established</b>
All programs or resources that are intended to improve students' academics or behaviors are inventoried and organized into a three tiered system of delivery in the following areas:				
Language Arts Grades K-2				
Language Arts Grades 3-5				
Language Arts Grades 6-8				
Language Arts Grades 9-12				
Mathematics Grades K-2				
Mathematics Grades 3-5				
Mathematics Grades 6-8				
Mathematics Grades 9-12				
Behavior Grades K-2				
Behavior Grades 3-5				
Behavior Grades 6-8				
Behavior Grades 9-12				
Progress is monitoring using Curriculum Based Measurements (CBMs) or behavioral charting in:				
Tier 1 ( 3 X per year)				
Tier 2 (1 - 2 X per month)				
Tier 3 (weekly to bi-weekly, or every 10 sessions)				
Additional instructional time is provided for:				
Tier 2 ( 30 min. per day)				
Tier 3 ( 30 – 60 min. per day)				
Progress monitoring data determines effectiveness of interventions and moves students through tiers.				

**Rating System:**

Awareness – Some staff are knowledgeable about RTI but little action has been taken.

Emerging – True for less than 50% of staff or school

Developing- True for more than 50% of the staff or school

Established- True for 90% or more of staff or school

**Evidence:**

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<b>Monitoring and Action Planning</b>	<b>Awareness</b>	<b>Emerging</b>	<b>Developing</b>	<b>Established</b>
A strategic implementation plan exists and is used by the School Based Leadership Team to guide the implementation of the Rtl model.				
School based Leadership Team meets at least twice each year to review data and implementation issues.				
School based Leadership Team meets at least twice each year with District Leadership Team to review data and implementation issues.				
Feedback on the outcomes of the Rtl Project is provided to school based faculty and staff at least annually.				
Changes to the strategic plan are documented and dated.				
Charted or graphed information is regularly shared with students and parents.				

Rating System:

- Awareness – Some staff are knowledgeable about RTI but little action has been taken.
- Emerging – True for less than 50% of staff or school
- Developing- True for more than 50% of the staff or school
- Established- True for 90% or more of staff or school

**Evidence:**

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<b>Professional Development</b>	<b>Awareness</b>	<b>Emerging</b>	<b>Developing</b>	<b>Established</b>
The staff has received an overview of the Rtl Model and understands its general features.				
Parents are provided information on the Rtl Process.				
Professional Development is job-embedded and ongoing.				
Includes follow-up (e.g., coaching, professional dialogue, peer feedback, etc.)				
Key school personnel are identified for enhanced training in specific components of the three tier model (screening, intervention, data analysis) to build school capacity and ensure sustainability.				
Professional development addresses relevant areas such as:				
Collaborative decision-making (e.g., professional learning communities)				
Effective use of data, including that gathered through ongoing progress monitoring, in making educational decisions				
Curriculum evaluation for effectiveness				
Collaborative delivery of instruction/interventions				
Research-based instructional practices, including supporting materials and tools				
What constitutes “interventions” versus “accommodations and modifications”				
Prescriptive and varied assessment techniques (targeted assessments, CBMs, error analysis, etc.)				
Progress monitoring techniques				
Parent engagement strategies				
Differentiated Instruction				
Content based instruction				
School wide behavior support				
Special Education identification using Rtl model				
Other:				

**Rating System:**

Awareness – Some staff are knowledgeable about RTI but little action has been taken.

Emerging – True for less than 50% of staff or school

Developing- True for more than 50% of the staff or school

Established- True for 90% or more of staff or school

Evidence:

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**ACTION PLAN**

<b>Indicator or Sub-Topic</b>	<b>Specific Actions</b>	<b>Resources</b>	<b>Timeline</b>	<b>Leads</b>	<b>Evidence of Change</b>

Planning Team: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\* Modified from documents originally developed by the states of Oregon, Colorado, Florida, and Pennsylvania

## APPENDIX C: GLOSSARY OF TERMS FOR RESPONSE TO INTERVENTION

**Core Curriculum (Core Program)** The core curriculum is the course of study deemed critical and usually made mandatory for all students of a school or school system. Core curricula are often instituted at the elementary and secondary levels by local school boards, Departments of Education, or other administrative agencies charged with overseeing education. As mandated by No Child Left Behind, core curricula must represent scientifically-based practice.

**Curriculum-Based Assessment (CBA)** CBA is a broader term than Curriculum-Based Measurement (CBM), as defined by Tucker (1987). CBM meets the three CBA requirements: (1) measurement materials are aligned with the school's curriculum; (2) measurement occurs frequently; and (3) assessment information is used to formulate instructional decisions. Tucker, J. (1987). Curriculum-based assessment is not a fad. *The Collaborative Educator*, 1, 4, 10.

**Curriculum-Based Measurement (CBM)** CBM is an approach to measurement that is used to screen students or to monitor student progress in mathematics, reading, writing, and spelling. With CBM, teachers and schools can assess individual responsiveness to instruction. When a student proves unresponsive to the instructional program, CBM signals the teacher/school to revise that program. CBM is a distinctive form of CBA because of two additional properties: (1) Each CBM test is an alternate form of equivalent difficulty; and (2) CBM is standardized, with its reliability and validity well documented.

**Data Point** A data point is one score on a graph or chart, which represents a student's performance at one point in time.

**Differentiated Instruction** Differentiated instruction refers to educators tailoring the curriculum, teaching environments, and practices to create appropriately different learning experiences for students in order to meet each student's needs. To differentiate instruction is to recognize students' varying interests, readiness levels, and levels of responsiveness to the standard core curriculum and to plan responsively to address these individual differences. There are four elements of the curriculum that can be differentiated: content, process, products, and learning environment.

**Early Intervening Services** Early intervening services are the preventative components of No Child Left Behind and the Individuals with Disabilities Education Act of 2004. Early intervening services are implemented to benefit students who manifest risk for poor learning outcomes but have not been identified as needing special education or related services.

**Evidence-Based Practice** Evidence-based practices are educational practices and instructional strategies that are supported by scientific research studies.

**Fidelity of Implementation** Fidelity refers to the accurate and consistent provision or delivery of instruction in the manner in which it was designed or prescribed according to research findings and/or developers' specifications. Five common aspects of fidelity include: adherence, exposure, program differentiation, student responsiveness, and quality of delivery.

**Formative Assessment** Formative assessment is a form of evaluation used to plan instruction in a recursive way. With formative assessment, student progress is systematically assessed to provide continuous feedback to both the student and the teacher concerning learning successes and failures. With formative assessment, teachers diagnose skill, ability, and knowledge gaps, measure progress, and evaluate instruction. Formative assessments are not necessarily used for grading purposes. Examples include (but are not limited to): CBM, CBA, pre/post tests, portfolios, benchmark assessments, quizzes, teacher observations, and teacher/student conferencing.

**Goal Line** (sometimes referred to as an aimline) The goal line on a graph connects the intersection of the student's initial performance level and date of that initial performance level to the intersection of the

student's year-end goal and the date of that year-end goal. It represents the expected rate of student progress over time.

**IDEA** IDEA stands for Individuals with Disabilities Education Improvement Act of 2004, also referred to as IDEA 2004. It was originally passed in 1975 with the latest reauthorization in 2004. It is a federal statute related to providing a free, appropriate, public education and early intervening services to students with disabilities ages birth through 21.

**Intensive Intervention** Intensive academic and/or behavioral interventions are characterized by their increased focus for students who fail to respond to less intensive forms of instruction. Intensity can be increased through many dimensions including length, frequency, and duration of implementation. Within RTI, intensive is sometimes referred to as tertiary intervention.

**Primary (Tier I) Level of Intervention** Primary intervention is the universal core program that all students receive.

**Problem-Solving Approach within RTI** Within RTI, a problem-solving approach is used to individually tailor an intervention. It typically has four stages: problem identification, problem analysis, plan implementation, and plan evaluation.

**Progress Monitoring** Progress monitoring is used to assess students' academic performance, to quantify a student rate of improvement or responsiveness to instruction, and to evaluate the effectiveness of instruction. Progress monitoring can be implemented with individual students or an entire class.

**Response to Intervention (RTI)** Response to intervention integrates assessment and intervention within a multi-level prevention system to maximize student achievement and reduce behavior problems. With RTI, schools identify students at risk for poor learning outcomes, monitor student progress, provide evidence-based interventions and adjust the intensity and nature of those interventions depending on a student's responsiveness, and identify students with learning disabilities.

**Secondary (Tier II) Level of Intervention** Secondary intervention supplements primary intervention (i.e., the universal core program) such that students receive additional research-based preventative treatment. Secondary level interventions are often short-term, implemented in small group settings, and may be individualized.

**Summative Assessment** Summative assessment is a form of evaluation used to describe the effectiveness of an instruction program or intervention, that is, whether the intervention had the desired effect. With summative assessment, student learning is typically assessed at the end of a course of study or annually (at the end of a grade).

**Tertiary (Tier III) Level of Intervention** Tertiary intervention supplements primary and secondary interventions to intensify instruction (see intensive intervention). Tertiary level of intervention often occurs under the auspices of special education. Individualized education program (IEP) goals are established; individualized student programs are developed formatively using systematic progress monitoring; and student progress data are also used to determine when a student may return to secondary or primary prevention. Tertiary level of intervention is usually implemented individually or in very small groups.

**Tiered Instruction** Tiered instruction describes levels of instructional intensity within a multi-tiered prevention system.

**Universal Screening** Universal screening is conducted, usually as a first stage within a screening process, to identify or predict students who may be at risk for poor learning outcomes. Universal screening tests are typically brief; conducted with all students at a grade level; and followed by additional testing or short-term progress monitoring to corroborate students' risk status.

**This glossary was compiled using the following resources: The RTI Glossary of Terms developed by the IDEA Partnership at NASDSE, the RTI Action Network Glossary, the National Center on Student Progress Monitoring, the National Center on Response to Intervention, the New Mexico Public Education Department RTI Glossary, the Georgia Department of Education RTI Glossary, the South Carolina Department of Education RTI glossary, and the North Carolina Department of Public Instruction**