

California's Response to Interventions

White Paper

Resulting from Summit 3 held on May 20, 2006



“The purpose of this title is to ensure that all children have a fair, equal and significant opportunity to obtain a high quality education... This purpose can be accomplished by- (4) holding schools, local education agencies, and States accountable for improving the academic achievement of all students...” and “(9) promoting school wide reform and ensuring the access of all children to effective, scientifically-based instructional strategies...”
[PL 107-110 §1001(4) and (9)]

Introduction

This white paper is a joint product of the education organizations that met together on May 20, 2006, to reflect and discuss elements of an effective response to intervention process and implications for application in the State of California. Organizations supporting these statements, listed in alphabetical order, include: Association of California School Administrators (**ACSA**), California Association of Resource Specialists and Special Educators (**CARS+**), California Association of School Psychologists (**CASP**), California Speech-Hearing Association (**CSHA**), California State Council for Exceptional Children (**CEC**), California Teachers Association (**CTA**), Special Education Local Plan Area (**SELPA**), California School Boards Association (**CSBA**) and California State Parent, Teacher Association (**CSPTA**). Representatives of our organizations met together to reflect deeply, discuss openly, collaborate, and build consensus around critical elements necessary to an effective response to intervention process. The goal of this group of organizations is to provide cross-stakeholder perspective to the California State Legislature and California Department of Education (CDE) to guide the development of state regulations, policies, and practices with regard to the implementation of effective response to intervention processes across the state and in local school districts.

Response to Intervention Foundations

The No Child Left Behind Act of 2001 (NCLB) focuses on increased academic achievement and accountability for the learning of all students. In its statement of purpose NCLB sets forth “...holding schools, local education agencies, and States accountable for improving

the academic achievement of all students...” and “...promoting school wide reform and ensuring thee access of all children to effective, scientifically-based instructional strategies...” [PL 107-110 §1001(4) and (9)]. Such focus was further extended by provisions of the Individuals with Disabilities Education Act in 2004 (IDEA '04) and the resulting Federal Regulations published August 14, 2006, which bring national and state attention to the evolving practice of implementation of response to intervention (Rtl) models to address needs and provide intervention strategies for struggling learners.

While the provisions of IDEA '04 focus on the potential use of a response to intervention process to identify students with specific learning disabilities (SLD), ***it is important to note that many school districts have implemented elements of response to intervention processes as a method to improve instruction and achievement for students within the broad context of general education over the past several years as a result of increased accountability in NCLB.*** NCLB, with mandates for accountability for all students, impacted inclusion of students with exceptional needs in general education curriculum and classrooms. IDEA '04 ***provides opportunities to impact general education student achievement through an Rtl process and improve outcomes for all students.***

This paper presents consensus statements around the five central questions/discussions of the May Summit:

1. Needed supports for effective implementation of Rtl,
2. Identification and use of research-based interventions,
3. Collection and use of data for instructional decision-making,
4. Determination of responsiveness or non-responsiveness to intervention, and
5. Determination of specific learning disability using a response to intervention process

The purpose of this paper is to share consensus statements from this group of education stakeholders to positively impact the development of regulations, policies, and practices with regard to effective response to intervention processes in the State of California.

Support and Conditions Necessary for Effective Implementation and Sustainability of a Response to Intervention Model

In order for a response to intervention process, regardless of specific model, to result in better outcomes for students we believe that the process should be supported consistently across the State of California (CA). It is recommended that the CDE continue to work with key stakeholders and decision makers to develop model designs and implementation strategies. We support action by the CDE and through the legislative process to promote and encourage effective implementation of Rtl statewide. It is also critical that implementing agencies recognize and support the need for:

- Time for collaboration and implementation necessary for Rtl to be effective;
- Professional development;
 - At all levels and for all stakeholders including parents, teachers, assistants, administrators, and support providers
 - That is comprehensive and addresses / provides for
 - a general overview of the Rtl process,
 - components of a strong intervention program,
 - identification /implementation of researched-based interventions
 - curriculum-embedded and diagnostic assessments to monitor student progress,
 - a focus on improving student outcomes,
 - time / resources for locally designed ongoing staff development to implement specific interventions,
 - collaboration and decision-making/problem-solving strategies,
 - data collection and analysis to support progress monitoring,
 - effective teaming strategies, and
 - an accountability system for implementation.
- Professional preparation and credential licensing, without an additional credential requirement, to provide and promote flexibility in service delivery for the purpose of implementing Rtl;
- Flexibility in monitoring and adjusting implementation as needed; and
- Address funding needs related to the implementation of response to intervention models to support for
 - professional development,
 - materials linked to scientifically-based research interventions,
 - technology to manage student data, and
 - collaboration time for monitoring student data and coaching.

We believe state guidelines for Rtl implementation should be integrated with guidelines for instruction, assessment, and accountability programs that currently exist in CA. Such state guidelines for Rtl implementation must include models and structures for collaboration among grade levels/departments and structures for parent involvement. Through policy, procedures, and advisories CDE must encourage maximum flexibility for local education agencies (LEAs) and their unique constituency groups.

Research-Based Interventions

NCLB and IDEA '04 both require the use of scientifically based interventions. It is understood that to the greatest extent possible interventions for struggling students should come from a basis in scientific education research. As there are multiple definitions of what is “scientifically-based” in current education literature, we recommend that CDE define what is acceptable as “research-based” evidence consistent with federal guidelines. With said definition, then CDE

should continue to make available a list of resources on research-based practices, instructional products, and strategies in reading, writing, math, oral language, and behavior aligned to targeted populations, including English language learners and other specific populations as necessary. A system also needs to be in place to ensure the resources list is continually amended and updated as more practices, strategies, and interventions are supported through research.

Data Collection and Use

Data-based decision-making is central to an effective RtI process. Therefore, data collected and analyzed within an RtI process should be comprehensive, reliable, valid, and useful for guiding instruction. While we recognize there are many professionals currently trained in data collection and interpretation at the school level, we must ensure that all involved in progress monitoring have access to professional development in this area. As CA moves forward with RtI implementation, we recommend CDE provide guidelines addressing the following areas:

- Acceptable data are both quantitative and qualitative and include multiple measures that are reliable and valid;
- Assessment tools should be flexible, sensitive to student populations, efficient, and yield valuable instructional information including standard treatment protocol intervention fidelity;
- Data collected and analyzed for academic decision-making should include criterion referenced assessments and/or curriculum based measurements aligned to state standards or curriculum goals, taking into consideration age and developmentally appropriate tools, as indicated by student need;
- Data collected and analyzed for behavior decision-making should be determined by individuals who are knowledgeable in specific areas of behavior;
- Data collected should be from multiple sources and focus on the whole child and include, but not be limited to, information concerning the social/emotional, economic, cultural, linguistic and physical, as well as academic status of the student;
- Once identified for a specific intervention, student data should be related to the scope and duration of intervention and valid data should be collected at progressively more frequent intervals as the intensity of the intervention increases; and
- Assessment data should be presented in an understandable format.

Determination of Responsiveness/Non-responsiveness

Inherent in the RtI process is the analysis of data to determine to what level a student responds to, or does not respond to, the intervention in place. A student's level of responsiveness indicates whether the intervention should be continued, changed, or discontinued. We recommend that CDE establish guidelines for districts and schools regarding

- Suggested criteria for determining when a student should participate in or discontinue participation in an intervention;
- Suggested criteria for determining when a student should move to a less intense or more intense intervention;
- Suggested timelines for continuing, fading, and eliminating interventions; and
- Suggested criteria to determine when a student
 - has responded to a specific intervention,
 - has not responded to a specific intervention, and
 - should be referred to special education.

Further, we believe it is important for CDE to support and encourage local education agency ability to build collaboration between and among general education, special education, and support services to engage as a team to look at available student data and provide analysis based on professional expertise and judgment. Additionally, we believe that parents should be apprised of interventions and outcomes throughout the student's involvement in the RtI process.

Determination of a Specific Learning Disability

Federal regulations subsequent to IDEA '04 state that each state must adopt criteria for SLD and must permit the use of a process based on the child's response to scientific, research-based intervention, therefore, we believe as CDE proceeds with development of state regulations, guidelines must be created relative to RtI being used as part of the process for determining SLD. Recommended for inclusion in state guidelines are statements relative to data collection and analysis prior to referral, criteria for referral for special education assessment, and assessment tools to be used after referral.

Prior to referral for SLD assessment there must be an analysis of data from interventions, including success and failure rates and fidelity of implementation. In addition, consideration must be given to variability of typical development as well as the research base tied to specific interventions.

A student may be referred for special education assessment if response to intervention is slow or nonexistent within the RtI process and a processing disorder is suspected. No student will be referred without documented intervention attempts. When a student is referred for possible eligibility as a student with SLD all previous data on student progress will be included as part of the formal assessment data.

Once a referral is made, appropriate assessment tools to be used as part of the formal assessment process will be determined by a team of professionals and may include, but not limited to, standardized assessments, grade level and/or curriculum-based measurements, criterion referenced assessments, student work samples, documented responsiveness or non-responsiveness to

interventions, processing disorder assessments, social emotional assessments, teacher observation, review of environmental barriers to learning, etc.

Rtl Pilot Programs

Recognizing that the CDE has been monitoring pilot programs in various districts, it is recommended that future CDE funded pilot programs be representative of the diversity within the state and include districts of various sizes, grade levels, and socio-economic strata. Outcome data from the pilot sites should be provided to all stakeholders to assist in decision making regarding programs and interventions. Outcome data from each pilot site should include:

- positive effects on various subgroups, e.g. English Learners;
- numbers exited from intervention;
- numbers in more intensive interventions;
- impact on statewide assessments and adequate yearly progress;
- stakeholder evaluation regarding satisfaction with process and outcomes;
and
- fiscal impact.

CDE and the pilot sites would then disseminate information regarding successful elements of Rtl programs across the state.

Concluding Comments

The organizations represented in this white paper, are committed to working together with the California State Legislature and the California Department of Education to ensure that the implementation of response to intervention processes in this state are effective and result in improved outcomes for all students.