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An Examination of Response to Intervention Development and Implementation Relative to Best Practices

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**AN EXAMINATION OF RESPONSE TO INTERVENTION DEVELOPMENT AND
IMPLEMENTATION RELATIVE TO BEST PRACTICES**

By

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M.S. University of Southern Maine 1996

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A DISSERTATION

Submitted in Partial Fulfillment of the

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Public Policy

University of Southern Maine

April 2016

Advisory Committee:


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By Paul W. Austin Jr., M.S. Ed., C.A.S.

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An Abstract of the Dissertation Presented
In Partial Fulfillment of the Requirements for the
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For the past 30 years, public education in the United States has been under fire for its failure to address a long decline in student performance. Education reform has been a focal point of the country, calling for improved student performance, and a reduction of the achievement gap for students struggling to meet academic standards. Following the passage of No Child Left Behind (NCLB), the U.S. Department of Education reauthorized the Individuals with Disabilities Education Act (IDEA) in 2004 (U.S. Department of Education, 2006). One important issue addressed in the reauthorization was the criteria needed to identify children under the handicapping condition of Specific Learning Disability (SLD). The definition of SLD remained unchanged in the 2004 reauthorization of IDEA, but the revised law provided school teams with more options to identify learning disabilities. Those additional procedures included the use of a Response to Intervention (RTI) model.

Following the reauthorization of IDEA in 2004, the state of Maine adopted new special education regulations that included the use of RTI in all public schools and later created new

state law, mandating the use of RTI in all schools. While Maine mandated school districts to develop and implement RTI in all grades by 2010, the state provided little support or guidance about how best to accomplish that goal. As a result, it is probable that Maine schools have utilized a variety of RTI procedures that may not reflect research-based best practices. Given that, additional research related to the development and implementation of RTI in Maine schools is warranted.

This qualitative study explored the development and implementation of RTI in two different school districts in Maine. It explores the perceptions of administrators, teacher leaders, and teachers from two elementary schools on the development, implementation, and impact that RTI has had in their district. Each of the subjects participated in a three-part interview process. The Austin Framework of Best Practices for Developing and Supporting RTI, and the Austin Framework of Best Practices for Implementing RTI were used in the study to better understand the RTI practices employed in these school districts in relation to the best practices identified in research.

While the study is based upon a relatively small sample of administrators, teacher leaders, and teachers, results suggested that despite the lack of guidance and resources from the state, the response from teachers, teacher leaders, and administrators was found to be generally positive in this study. Key findings suggested that participants appreciate the focus on teaching strategies. Although there was some initial resistance from school personnel toward the development and implementation of RTI, the general perception of RTI is now one of acceptance. Finally, regardless of how well their districts' RTI program aligned to the best practices identified in research, respondents from each district reported that their respective RTI programs had improved student-learning outcomes.

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CHAPTER I: INTRODUCTION

For the past 30 years, public education in the United States has been under fire for its failure to address the decline in student performance. As a result, education reform has been a focal point for decades, with political leaders vowing to implement changes aimed at improving the performance of struggling students. In October 2001, President George W. Bush issued an executive order to create The President's Commission on Excellence in Special Education (PCESE), in which he charged the commission with studying issues related to providing special education to improve the educational performance of children with disabilities. In July 2002, the commission released its findings, making a formal recommendation that schools focus more on results – not on process. The report also recommended the use of a scientifically based system to identify children with disabilities (Berdine, 2003).

Parallel with the work of the PCESE, the No Child Left Behind Act of 2002 (NCLB) was enacted to improve America's schools and the performance of all students, not just those with disabilities. NCLB required all states to set specific learning standards, assess children on those standards, and report results to the United States Department of Education to obtain funding through the Elementary and Secondary Education Act (ESEA). NCLB set lofty goals of school accountability to ensure that all children would be performing at or above proficiency by 2014 (Fact Sheet: No Child Left Behind, January 8, 2002). Greater accountability for schools was deemed necessary because, despite multiple initiatives such as the Title I Reading and Head Start programs, the achievement gap between economically disadvantaged students and students from wealthier families and communities, had not decreased (Meier, Kohn, Darling-Hammond, Sizer, & Wood, 2004). Included in NCLB was language pertaining to the screening of children at risk for school failure, as well as prevention services utilizing scientifically based interventions.

NCLB policy highlighted the importance of identifying children struggling to meet standards, and providing interventions that would close achievement gaps.

Following the passage of NCLB, the U.S. Department of Education reauthorized the Individuals with Disabilities Act (IDEA) in 2004. One important issue addressed in the re-authorization was the criteria needed to identify children under the handicapping condition of Specific Learning Disability (SLD); there was widespread concern that too many children were being identified with learning disabilities. The revised law included a section titled “additional procedures for identifying children with learning disabilities” that provided school teams with more options to identify learning disabilities. Those additional procedures consisted of three options: the use of an intelligence quotient (IQ)/achievement discrepancy model; the use of a Response to Intervention (RTI) model; or the use of another research-based method in the identification of children with an SLD. Although IDEA 2004 allowed the use of an IQ/discrepancy model, states were not allowed to mandate the use of the model exclusively in the identification of children with learning disabilities. Essentially mirroring the concepts outlined in NCLB, states were directed to allow a process in which schools could use data from scientific and research-based interventions to determine the presence of a specific learning disability in children (Individuals with Disabilities Education Act. Regulations 34 C.F.R. Part 300, 2004).

The policies of NCLB and the re-authorization of IDEA were parts of a substantial push to improve student performance across the nation that continues today. NCLB and the re-authorization of IDEA focused on early identification of struggling learners and the provision of scientifically based interventions to close their achievement gaps; these practices are the cornerstones of RTI. Given the importance of improving student performance across the nation,

there is a need for more research documenting just how RTI has been developed and implemented nationally and locally.

Statement of the Problem

Following the adoption of NCLB and the 2004 re-authorization of IDEA, the state of Maine adopted new special education regulations that included the use of RTI in all public schools, and later created a new state law aimed at improving all students' performance (Maine's Unified Special Education Regulations [MUSER]: Chapter 101, 2008). With those changes, RTI became a focal point in Maine schools for addressing the specific needs of students failing to meet the standards of the Maine Learning Results (the established set of academic standards all Maine students must attain to earn a high school diploma). Those standards were originally developed in 1997, and were updated in 2011 to include the English language arts and mathematics standards of the Common Core State Standards (National Governors Association Center for Best Practices, 2010).

Maine adopted new special education regulations in 2008, and revised them in 2010. They included the use of RTI data in the identification process for students with an SLD (MUSER, 2008). Requiring the use of RTI as part of SLD identification was well grounded, and supported by research. However, the requirement of RTI as part of general education went beyond the required provisions of IDEA 2004, because it mandated that all public schools develop and implement a comprehensive kindergarten through grade 12 RTI program by the beginning of the 2010-2011 school year.

In support and preparation for statewide RTI, the Maine Department of Education published an "RTI Guide" in the fall of 2009, which was to assist school districts with development and implementation of their RTI frameworks and programs (Maine Department of

Education, 2009). In the guide, the Maine Department of Education defined RTI as a multi-tiered intervention program that utilizes a data-based decision-making process to address the academic and behavioral difficulties of all students in grades kindergarten through 12. Additionally, the Department stressed that RTI uses standards-driven and proactive approaches to prevention and intervention. The foundation of RTI relies upon quality curriculum and instruction in the general education setting with embedded assessments to measure student progress. When students do not make adequate progress in their classroom settings, RTI frameworks call for a tiered system of supplementary supports, both academically and behaviorally, that incorporates data collection and analysis. Those supports and interventions were framed to vary in intensity based on student need (Maine Department of Education, 2009).

Also in 2009, The Maine Legislature adopted Public Law LD 1325: An Act Regarding Curriculum Requirements and Standards for Awarding a High School Diploma. In LD 1325, all school districts were required to provide students with multiple educational opportunities and pathways in an effort to ensure that every student is able to meet the standards of Maine Learning Results. School districts were directed to provide increased support and appropriate interventions to those students who initially failed to meet those standards.

For the implementation of RTI, the Maine Department of Education provided the basic outline of a framework that included the use of multi-tiered approaches for intervention, a problem-solving method for decision-making, and the use of data to inform instructional decisions (Maine Department of Education, 2009). In the RTI Guide, the Maine Department of Education outlined several required components that all school districts were to include in their RTI programs:

- High quality scientifically based instruction and behavioral supports in the general education setting
- Universal screening of academics and behavior in order to determine which students need closer monitoring or additional interventions
- Multiple tiers of instructional strategies that are progressively more intense and include the use of scientifically based interventions matched to student needs
- Continuous monitoring of student performance during interventions using formative assessments, including Curriculum Based Measures, to determine if students are meeting goals and to inform instructional decision-making
- Use of a collaborative and problem-solving approach by school staff in developing, implementing, and monitoring the intervention process
- Concurrent evaluation of interventions to confirm that they were implemented as intended and with appropriate consistency, and
- Parent involvement throughout the process.

(Maine Department of Education, 2009, pp. 5-6).

Although the state of Maine provided an outline of the components districts were required to include in their RTI programs, Maine's RTI guide failed to provide substantial detail beyond the most basic and widely accepted characteristics of RTI programs, and no funding to school districts that would have supported development and implementation was provided. A review of Maine's regulatory and guidance documents suggested that, compared to other states, Maine fell short in (a) identifying specific interventions, (b) providing detailed information on data collection, (c) providing details about what data should be used to make instructional decisions, and (d) including specific guidance on assessing the fidelity of instruction, an

important component in high quality intervention programs (Hauerwas, Brown, & Scott, 2013). Mellard, Stern and Woods (2011) wrote that “the various ways in which schools have implemented RTI are, in part, the result of having limited guidance from theory and research at the time they adopted their practices” (p. 3). Because the Maine Department of Education failed to provide essential details of RTI development and implementation that were grounded in theory and research, it is likely that there has been considerable variation among Maine schools in the development and implementation of RTI.

Although the Maine Department of Education afforded school districts time for developing and implementing RTI programs, the lack of specific detail left many unanswered questions. Aside from referencing several RTI blueprints published by the National Association of State Directors of Special Education (Elliot, Morrison, Casey, & Phillips, 2008) school districts were provided little guidance specifically addressing the best practices they should follow in developing and implementing RTI. It is thus probable that some districts have been more successful than others in the development and implementation of RTI. Furthermore, although Maine requires RTI in all schools, the state has not established any formal process to review its development and implementation.

The Maine legislature may have been well intended in adopting revisions to Maine’s Unified Special Education Regulations and creating Public Law 1325 that required the use of RTI in all schools, but school districts were not provided with resources for complying with component steps necessary to develop and implement RTI. Additionally, because the state has no established method for measuring statewide implementation, there is no way to determine if districts have implemented RTI in a way aligned with Maine’s required components, or with the best practices identified in literature. With the lack of resources and guidance to school districts

across the state, and the lack of monitoring to ensure best practices, RTI has potentially resulted in a wide range of policy and instructional practices that could ultimately fail to achieve the desired outcomes of meeting the needs of struggling learners.

Purpose of the Study

The purpose of this study was to examine the development and implementation of RTI in relation to best practices identified in research. This research attended to school-level implementation that included policy, instruction, assessment, and intervention pertaining to RTI. This research was conducted in school districts that had worked hard to implement kindergarten through grade 12 RTI programs. To meet the purpose, the researcher developed an understanding of existing district policies, and of the RTI frameworks that were created to comply with state law; examined the instructional and intervention practices used by teachers in relation to an adopted RTI framework; and explored the responses of administrators and teachers regarding the development and implementation of RTIs, and the impact that RTI has had on instruction, and student outcomes. A set of best practices for developing and implementing RTI specific to Maine, was developed and used to better understand the extent to which RTI development, implementation, and practices aligned with the requirements established by the Maine Department of Education, and with the best practices identified in the literature. This research provided information that can be embraced by schools in the development and implementation of RTI, or to improve upon their current RTI programs.

Research Questions

The key research questions guiding this qualitative research study are:

1. What are the policies, instruction, assessment, and intervention practices used by selected Maine schools in the development and implementation of RTI?

2. How do the identified practices align with best practices identified in research on the development and implementation of RTI?

Significance of the Study

RTI is one of the most influential strategies for positively impacting student achievement (Hattie, 2012). There is a substantial body of research that identifies best practices for the development and implementation of RTI, and research has found that implementing performance feedback measures results in greater fidelity of implementation (Burns, Peters, & Noell, 2008). However, due to the lack of clear and decisive guidelines for Maine schools, there are many unanswered questions as to how districts can develop policy and frameworks that support successful program development and implementation. The intent of this research, then, was to provide practical information to school administrators, teachers, and policymakers about the development and implementation of RTI, so that schools could develop or improve RTI programs. This study will contribute to the research in linking policy and practice of RTI by identifying how schools developed and implemented RTI in alignment with the best practices identified in the literature.

CHAPTER 2: LITERATURE REVIEW

The History and Origin of RTI

Although RTI might be considered new education reform to some, RTI has been discussed for decades. Dunn (2010) noted that the basic principles of RTI are found in the 1982 National Research Council report referencing the validity of special education classification (Heller, Holtzman, & Messick, 1982) in which, the following criteria for special education were included:

- Adequate instructional programming in general education for all children to learn
- Effective intervention programs to determine if special education classification is warranted
- School teams that ensure children placed in special education receive academic instruction that is likely to lead to improved outcomes
- High quality and effective instruction for all students
- Data review to determine academic progress in instructional programs, and to determine if a child needs specialized services
- National, state, and district monitoring of student placement in special education to ensure that appropriate instruction is being delivered, and that procedures are in place to address inequities (Dunn, 2010).

In 2001, President George W. Bush issued an executive order to create The President's Commission on Excellence in Special Education (PCESE), in which he charged the commission with studying issues related to the provision of special education as a way to improve the educational performance of children with disabilities. In July 2002, the commission released its findings, and endorsed RTI as one component of needed change through a formal

recommendation for schools to focus more on results than on process. More specifically, school administrators were encouraged to streamline their processes of special education evaluation that included the use of an evidence-based, or scientifically based, system to identify children with disabilities (Berdine, 2003).

From the inception of specific learning disability (SLD) as a separate category for special education identification, the discrepancy model (i.e., the difference between the student's IQ and academic achievement) had been the primary method for identifying children for special education under that handicapping condition. However, some researchers have called the practice into question. Fletcher, Francis, Morris, and Lyon (2005) argued that the use of a single assessment to identify a learning disability based upon an IQ-achievement discrepancy has little value because "such assessments are not directly related to treatment and the diagnosis itself is not reliable" (p. 519). Fletcher and Vaughn (2009) reported that although cognitive processing deficits are often associated with learning disabilities, the use of the discrepancy model has not proven to be a reliable source on its own for identification of learning disabilities, or for prescriptive interventions that lead to positive student outcomes.

More recently, Fletcher, Stuebing, Barth, Miciak, Francis, and Denton (2014) suggested that the use of multiple achievement measures in the identification of children with learning disabilities was necessary to ensure accuracy. The use of curriculum-based measurement (CBM) progress data alongside norm-referenced subject area assessments might improve the validity and reliability of the identification process (Fletcher et al., 2014). While the discrepancy model was initially somewhat useful to educators in determining the presence of an SLD, it provided only limited information that teachers could use to develop and support interventions to improve academic outcomes. An unintended consequence of the discrepancy model was that,

unfortunately, students who were struggling academically and referred for special education, but who failed to show a severe discrepancy between IQ and achievement, were often either not identified at all, or identified in later grades when the discrepancy between IQ and achievement grew large enough to qualify for services. Notably, the use of the discrepancy model as the primary criterion for SLD identification appears to have led to an increase in SLD identification in schools between 1977 and early 2000. Those issues spurred the debate that eventually resulted in the emergence of RTI as an alternative method for the identification of SLD (Berkeley, Bender, Peaster, & Saunders, 2009).

RTI was formally included in the 2004 re-authorization of the Individuals with Disabilities Education Improvement Act, in which the U.S. Department of Education allowed three specific options to identify children with learning disabilities. First, states were no longer permitted to *require* schools to use the discrepancy model in the identification of children with an SLD, but the discrepancy method was still allowed. Second, states were directed to *allow* a process in which schools could use data from scientific and research-based interventions to determine the presence of a specific learning disability in children (IDEA, Regulations 34 C.F.R. Part 300, 2004). Third, states were *required* to allow districts the option of using an alternative research-based method.

RTI Development

States and schools that have implemented quality RTI programs have found great success in improving student achievement. The point is best illustrated in *Visible Learning for Teachers*, where author John Hattie reported that RTI ranked the third most influential practices schools can use to improve student outcomes (Hattie, 2012). Thus RTI is an important practice that could potentially close the achievement gaps for most children struggling to meet local,

state, and national education standards. Research has shown that individual children who received tiered interventions outperformed their peers who had not received such intervention (Gilbert et al., 2013). Schools that have implemented successful RTI programs have shown greater school-wide academic improvement (Mellard, Frey, & Woods, 2012). Given the potential of RTI for improving student outcomes, the development and implementation of RTI in public schools is paramount, and deserves substantial attention to best practices.

In their publication of the RTI Guide (Maine Department of Education, 2009), the Maine Department of Education wrote that the success of RTI depends on a collaborative approach to teaching and learning that is supported by everyone in the school. Such collaboration requires educators to adopt new ways of thinking. Attention must be paid not only to research about effective instruction, but also to managing the change process (Maine Department of Education, 2009). Recognizing the importance of the process for implementing RTI, the department referenced three overarching steps for implementation: consensus building; infrastructure building; and implementation (Maine Department of Education, 2009). Those steps were recommended as part of a three-part blueprint series published in 2008 by the National Association of State Directors of Special Education (NASDSE) addressing state, district, and school development and implementation of RTI (Elliot & Morrison, 2008). Because less attention has been paid to the logistics of implementing RTI than to its institution, this research focused on NASDSE's work, and on that blueprint.

NASDSE Implementation Components

Consensus. The first step in the implementation of RTI in any school district is to build consensus. The objectives for consensus building are to develop a shared vision that RTI is an initiative for all that is led by general education, and that RTI and problem-solving will result in

more productive and equitable outcomes for all students. As part of consensus building, district personnel need to identify the administrative support necessary for the planning and implementation of RTI that clearly identifies the stakeholders in the district, informs them about RTI, and assures them that their input will be valued in the development of the framework structure. Finally, personnel need to develop a common understanding of the scope of RTI implementation. That is, to help each other understand how the framework of RTI will help children achieve better academic outcomes (Elliot & Morrison, 2008).

Infrastructure. The second step of implementing RTI is to build the framework or infrastructure of the RTI system. In that process, the district's RTI leaders develop a framework that has all the required components in place and ready for implementation. As part of the infrastructure building, personnel need to define the policies and procedures regarding how to implement RTI and the problem-solving model in their schools. It is recommended that districts complete a needs assessment to identify areas of strength and areas of need related to an RTI system, to outline an evaluation plan, and identify the data management system(s) that will be used to support RTI implementation. Finally, it is recommended that districts develop plans for how they will support the implementation of RTI through technical assistance and professional development (Elliot & Morrison, 2008).

Implementation. The third step suggested in the RTI blueprint (2008) is implementation. In that step, the district needs to have all the necessary supports in place to ensure successful implementation of RTI. It is recommended that districts outline a professional development plan that provides ongoing and sustained support for RTI implementation, and that the districts develop and utilize an evaluation plan to assess the outcomes of RTI (Elliot & Morrison, 2008). There are no simple solutions to the successful implementation of RTI, but planning,

communication and collaboration appear to be keys for success. That point is illustrated in a yearlong study of a school district's implementation of RTI which highlighted the importance of clear communication about the purposes, practice and process of RTI. Through focus groups that explored the perceptions of school personnel about RTI, teachers raised concerns that even after a full year of implementation, they still did not fully understand the need for RTI and they lacked training for implementation (Sanger, Friedli, Snow, Brunken, & Ritzman, 2012).

RTI is an important step for improving student outcomes, but successful implementation requires change and growth for all. School personnel must possess and demonstrate several skills and competencies in order to successfully implement RTI. Teachers must be able to effectively deliver evidenced-based instruction to improve student achievement. School personnel must be able to view and interpret student performance data, and they need to understand that effective classroom interventions begin with quality differentiation of instruction. Teachers, administrators, and specialists must collaborate with one another, promoting shared leadership and ownership of all students (Bean & Lillenstein, 2012). The goal of providing a comprehensive and high quality RTI program is that 80 percent of all students will be able to meet Tier 1 benchmarks through core programming delivered with fidelity. Additionally, individual and school-wide results will improve over time (National Research Center on Learning Disabilities, 2006).

The National Association of School Psychology (2009) defined the RTI process as addressing those skills that are universally taught and reinforced for all children. NASP (2009), and Bursuck and Blanks (2010) recommended a multi-tier approach to RTI, suggesting the use of quality teaching in Tier 1, and increased support and smaller group interventions in Tiers 2 and 3.

RTI is a powerful tool that emphasizes providing quality instruction, and addressing the needs of young learners by assessing student progress regularly and using data to inform instructional interventions (Gresham & Little, 2012). “RTI is the practice of (1) providing high quality instruction matched to student need and (2) using learning rate over time and level of performance to (3) make important educational decisions. Those components of RTI are essential to the development of a successful RTI implementation strategy” (Elliot & Morrison, 2008, p. 3).

RTI Frameworks

All RTI frameworks include universal screening, high-quality, research-based classroom instruction, multiple tiers of interventions with increasing intensity based upon student needs, and assessment of student performance that informs instruction and intervention (Werts, Lambert, & Carpenter, 2009). Ikeda, Rhan-Blakeslee, Niebling, Allison, and Stumme (2006) described RTI as a framework of intervention that includes screening to assess student problems, diagnostic measures to identify specific areas that need to be addressed, researched-based interventions, and measuring student progress in meeting established standards.

Mellard, Stern, and Woods (2011) defined RTI as a framework for the provision of interventions that are matched to the needs of students. However, Mellard et al. found considerable variance in the RTI frameworks that schools implemented because of the limited knowledge of theory and practice school districts had at the time they developed their frameworks. Although there are many RTI frameworks, Mellard et al., specifically outlined the works of Batsche, Curtis, Dorman, Castillo, and Porter (2008), Fuchs and Fuchs (2005), Johnson, Mellard, Fuchs, and McKnight (2006), Vaughn (2005), Shinn (2008), and Chun and Witt (2008),

as models that have been validated in the literature and could be implemented by school districts (Mellard et al., 2011).

Batsche et al. (2008) developed a problem-solving/RTI model to address both behavior and academic problems at the elementary level. The core principles of the Batsche model are that all children receive effective instruction and early intervention. To achieve that goal, Batsche et al require that all children are screened for learning problems at the beginning of the school year, with an expectation that an 80-percent pass rate reflects an effective core curriculum.

Curriculum-based measurement (CBM) is the primary method to measure progress, but the framework does not specify the number of data points or weeks of progress monitoring necessary to make informed educational decisions. Services are delivered through multiple tiers (1, 2, and 3), utilizing a problem-solving methodology to define and validate learning problems, determine and implement appropriate interventions, and evaluate student response to intervention (Batsche et al., 2008).

Fuchs and Fuchs (2005) developed an RTI model to address reading and math problems in elementary-aged children. The core principles of the model include ongoing assessment of student performance and identifying children in need of early intervention. In the Fuchs and Fuchs RTI model, all students are screened at least one time per year to identify those who are at-risk. Once identified, students are monitored for a period of at least five to eight weeks in Tier 1 in an effort to reduce the number of children falsely identified as at-risk, and prior to placement in Tier 2 interventions. Consistent with Batsche et al. (2008), Fuchs and Fuchs suggest CBM as the primary method for measuring the effectiveness of intervention, and RTI services are provided in a multi-tier framework that increases with intensity based upon the response of the student to intervention (Fuchs & Fuchs, 2005).

Johnson, Mellard, Fuchs, and McKnight (2006) developed an RTI framework to address reading problems in children at the elementary level. The core principles of the framework include the use of scientifically based instruction, school-wide screening for learning problems, research-based interventions, monitoring progress, and ensuring fidelity of instruction and intervention. All students are screened three times per year, because the authors believe that over identifying children for RTI is better than under identifying. Progress is monitored and tracked weekly for at least five weeks in Tier 1 to identify those needing additional intervention. Progress monitoring in Tiers 2 and 3 occurs at least two times per week during intervention (Johnson, Mellard, Fuchs, & McKnight, 2006).

Vaughn (2005) developed an RTI framework to address reading problems in children from kindergarten to grade eight. It is a descriptive, not prescriptive, model that is flexible enough to utilize any researched-based intervention. Interventions are based upon student need, and occur in whole-class settings, small groups, and one-on-one settings as needed. Student groupings can occur within grade levels or across grade levels based upon student needs. Screening of all students in kindergarten through third grade occurs three times per year, with a focus on word identification, comprehension, and fluency. At the upper elementary and middle levels, students are screened through skill assessments. Formative assessment drives the mode, and is used to make decisions about instructional changes. Consistent with other RTI frameworks, it utilizes a three-tier model of intervention that grows in intensity based upon student need (Vaughn, 2005).

Shinn (2008) suggested an RTI framework to address all academic areas at the secondary level. In the framework, the use of skill intervention, positive behavior supports, consultation with mainstream teachers, and scientifically based progress monitoring tools are among the core

principles. Like other models, Shinn's framework consists of three tiers of intervention that begin with high-quality classroom instruction, but grow in intensity aligned with student response. Universal screening of all children in grades five, six, and nine are recommended in the framework using CBM probes, but after ninth grade, assessment is not universal, and is focused on individual students. Progress monitoring for decisionmaking occurs weekly for a period of four to six weeks during Tiers 1 and 2, while Tier 3 interventions are monitored with greater frequency during more intensive interventions (Shinn, 2008).

Chun and Witt (2005) developed the System to Enhance Education Performance (STEEP) to address the academic needs of all children at all grade levels. STEEP includes the use of data and simple procedures to define student learning problems in solvable terms. Interventions are targeted on individual academic skills. STEEP uses a three-tier intervention framework that begins with a core curriculum and increases with intensity based upon problem solving methods. Universal screening is completed by the use of CBM, following a scripted protocol and schedule of implementation. Key elements of Tier 1 in STEEP are a focus on the effectiveness of core instruction and assessing student motivation versus skill level prior to moving to more intensive intervention in Tiers 2 and 3 (Chun & Witt, 2008).

Brown-Chidsey and Steege (2005) introduced a framework in which the three tiers of RTI are reflected in three sections of an inverted triangle. In their framework, Tier 1 of RTI is located at the top of the inverted triangle and represents the general education curriculum. Tier 1 is universal and provided to every student. Tier 2 is the middle section of the Brown-Chidsey and Steege framework, and is representative of those students needing intensive and specific instruction in order to meet success at school. Tier 3 is found at the bottom of the inverted triangle and represents the smallest subset of children who have not found success in Tier 1 or 2.

Tier 3 activities include more intensive instruction, and comprehensive assessment to determine if a child might have a specific disability that would meet the criteria for special education eligibility. Within the framework, the importance of data regarding student progress is noted. That is, student performance data is used to determine movement between tiers, indicating the need for either more or less intensive instruction (Brown-Chidsey & Steege, 2005, p. 3)

As evidenced above, frameworks that Mellard et al. (2001) and Brown-Chidsey & Steege (2005) outlined included universal screening, three-tier levels of intervention for struggling learners, and progress-monitoring to inform instruction and intervention. Thus, universal screening, Tier 1, 2, and 3 supports, and progress monitoring will be further discussed in this chapter.

Universal Screening

Universal screening is the use of “brief assessments that are valid, reliable, and demonstrate diagnostic accuracy for predicting which students will develop learning or behavior problems” (NCRTI, 2010, p. 8). The use of universal screening is a critical component for identifying children who, without intervention, would likely continue to experience serious academic difficulties (Fuchs, Fuchs, & Compton, 2012). Reschly (2014) said that universal screening applies to all children, and is accomplished through the use of time-efficient measures that accurately identify children who are at-risk for academic and behavioral problems. Universal screening is most prominent in assessing early reading development with simple fluency measures that require only three to five minutes per child. For other reading assessment, universal screening of children generally occurs three times annually: at the beginning, middle and at the end of the school year (Reschly, 2014).

When selecting universal screening instruments, districts need to be mindful of assessments that are so time- and/or personnel intensive as to hinder the RTI process, or be counterproductive to the efficiency of the RTI process (Riley-Tillman & Burns, 2009). Although the frameworks outlined above vary in the number of annual screening assessments, they are uniform in suggesting that all students should be screened at least one time per year (NCRTI, 2010). The NCRTI (2010), Fuchs et al, (2012), Harn, Chard, & Kame'enui, (2011) and Wixson and Valencia (2010), all recommend a two-stage universal assessment process that would include additional, more in-depth assessment of students who failed to achieve a benchmark score on the first screening assessment to ensure the validity and reliability of assessment data. For any RTI program to be effective, districts must be able to identify, with a high percentage of accuracy, those children in need of intervention (Hughes & Dexter, 2011). The data obtained through the screening process should be compared with other sources of information about student performance to identify the students who might need additional support through RTI intervention (Brown-Chidsey & Steege, 2010).

Tier 1

The purpose of Tier 1 in RTI is to implement a school-wide curriculum that is evidence-based to address the needs of all children (Harn et al., 2011). Students who are identified as at risk through universal screening are provided interventions and assessed regularly using brief assessment tools that are adequate for monitoring student progress toward local or state standards (Fuchs & Fuchs, 2005). In Tier 1, teachers should ask guiding questions for instructional planning, including those about the expected learning outcomes of all students, the skills all students need in order to master concepts, and how to differentiate teaching so that the learning objectives are mastered by all students (Gresham & Little, 2012).

The importance of high-quality Tier 1 instruction was illustrated by Stecker, Fuchs, & Fuchs (2008) who reported that through such instruction and progress monitoring, some students who had failed to meet standards were able to catch up to their peers (Stecker et al., 2008). Furthermore, Noll (2013) reported that children from highly successful teachers' classrooms were more likely to quickly and successfully exit RTI Tier 2 and 3, as compared to their peers from low-performing classrooms. Hughes and Dexter (2011) reported that the use of an RTI model that supports evidence-based Tier 1 instruction effectively eliminates poor instruction as a reason for students who fail to make adequate progress. In Tier 1, grouping is an essential tool for instruction as small groups are flexible and can change based upon the needs of students. For best results, students are grouped based on performance data and rate of growth compared to peers (Brown-Chidsey, Bronaugh, & McGraw, 2009).

Tier 2

Tier 2 students are those performing between grade level, and substantially below grade level. Such students need additional instructional supports that will help them get back on track. Tier 2 interventions need to be well-planned, evidenced-based interventions delivered by qualified personnel who have been thoroughly trained to correctly administer the program. Progress monitoring is an important component, as data pertaining to student progress are essential in determining the effectiveness of interventions. If a student is not showing adequate progress after several weeks in Tier 2 intervention, the team needs to change the intervention or develop a Tier 3 intervention (Stecker, Fuchs, & Fuchs, 2008).

Harn et al. (2011) suggested that the purpose of Tier 2 in RTI is to "increase support to those identified as at risk and hopefully catch them up as quickly as possible" (p. 234). Tier 2 instruction is generally provided three to five times per week, for approximately 30 minutes per

session. With intervention, students are assessed at least once a month to evaluate progress toward local or state standards (NCRTI, 2010). For Tier 2 intervention, studies have suggested that nine to twelve weeks might be needed to achieve the level of reliability and validity in the assessment needed to make educational decisions (Norman, Christ, & Zopluoglu, 2013). Christ, Zopluoglu, Long, & Monaghan (2012) suggested that the reliability of data collected during progress monitoring improves by increasing the number of weeks that data points are collected. Thornblad & Christ (2014) reported that at least six weeks of progress monitoring and data point collection are necessary to obtain valid information about student progress, and make reliable educational decisions based upon that data. Even with having enough data for an observed trend, it is essential that school personnel understand that if a parent requests a referral to special education, the school must comply immediately, and the need to collect additional RTI data cannot be used as a reason to delay such a referral.

Tier 3

For students who have not made adequate progress during the intervention trials in Tier 2, the next step of RTI is to provide more-intensive intervention. Such interventions are generally delivered either one-on-one or groups of no more than three children. Tier 3 may lead to an evaluation for special education to rule out a specific learning disability, or other disabilities that contribute to a student's lack of progress, despite the use of intensive, researched-based intervention delivered with fidelity. Should school teams choose to make a referral to special education, evaluations must be individualized, comprehensive, and consistent with state and federal laws (Fuchs & Fuchs, 2005).

It is important to note that one of the major differences among Tiers 1, 2, and 3 is that each level of intervention grows with intensity and time, with smaller groups of children

(Harlacher, Sanford, & Nelson). If the instructional intensity and interventions offered in Tier 1, Tier 2, and Tier 3 do not increase or change, and if the interventions are not delivered with fidelity, then efforts to improve student achievement may be wasted. Attention to the intensity of the strategies within the tiers of intervention is highly important (Mellard, McKnight, & Jordan, 2010). For the purpose of RTI, intensity is generally regarded as changes in the frequency, duration, and group size of the particular intervention. Thus, as a student moves between tiers, one would expect greater frequency of intervention, longer intervention sessions, and with smaller groups of students.

RTI and Special Education

The NCRTI reports that “RTI is not synonymous with special education. Rather, special education is an important component of a comprehensive RTI framework that incorporates primary, secondary, and tertiary levels of prevention” (NCRTI, 2010, p. 12). School personnel should work collaboratively to implement RTI and to make important decisions about intensity of intervention. “Movement to less intensive levels of the prevention framework should be a high priority” (NCRTI, 2010, p. 12). If general and special educators do not work collaboratively, friction between them due to competition for resources could occur. In a Nebraska study of school-wide implementation of RTI, general education teachers raised concerns about why some students were assigned to specific RTI classes and not to special education classes. Additionally, those teachers wondered that if special education resources could be used more easily in general education settings, it would free up additional resources to help more students (Sanger et al, 2012).

The Maine legislature mandated that all school districts implement RTI by 2010, and the requirement was written into Maine’s special education regulations (MUSER: Maine's Unified

Special Education Regulations: Chapter 101, 2009). Maine was one of 17 states that adopted RTI as a requirement for the identification of children with SLD in their state regulations for special education. Although Maine supported the use of RTI in determining eligibility for special education under the handicapping condition of SLD, Maine did not eliminate the use of cognitive assessments for the purpose (Zirkel & Thomas, 2010). In so regulating, Maine is one of only three states that requires the use of RTI in addition to the identification of cognitive processing deficits to determine eligibility (Hauerwas, Brown, & Scott, 2013). While Maine requires the use of RTI prior to identification for special education, a student's failure to make progress in RTI alone, even if delivered with increased intensity and fidelity, is not enough to qualify for special education as a student with a SLD. In addition, Maine requires that the comprehensive evaluation shows the presence of a cognitive processing deficit, and at least an average IQ for fourth through twelfth grade children, to qualify as a student with an SLD. Thus, student assessment data could show that a student failed to make progress in any of the three tiers of intervention, but still not qualify for special education if the student did not exhibit a substantial cognitive processing impairment.

That requirement is likely to create confusion among team members as to what to do with students who fail to improve academically after scientific, researched-based intervention, delivered with fidelity, but whose cognitive processing scores suggest no impairment. Further complicating the decisionmaking process for special education, research has shown that despite the availability of data pertaining to student performance, there is little guidance for what data special education teams should be looking at to make a special education determination (Hauerwas, Brown, & Scott, 2013). Nonetheless, understanding fidelity of instruction is very important because both IDEA 2004 and Maine's special education regulations require that prior

to determining the presence of a learning disability, school teams must rule out that a student's performance is not due to a lack of instruction in reading or math (MUSER, 2013).

Measuring Fidelity

The literature is clear that RTI is an important endeavor with great promise for improving student outcomes. The National Research Center on Learning Disabilities (NRCLD) (2006) suggested that RTI interventions should be directly and frequently observed to document treatment integrity. By doing so, schools can assure that student assessment results are directly attributable to the intervention employed, and that results can be duplicated. As noted by the NRCLD, there are several ways to document intervention integrity, which are: (a) linking interventions to outcomes, (b) defining responsibilities of personnel, (c) defining operations and techniques of interventions, (d) creating a data system for measuring the operations of interventions, (e) creating a system in which feedback about decisionmaking is obtained, and (f) developing accountability measures to address non-compliance with the intervention protocol (National Research Center on Learning Disabilities, 2006). Keller-Margulis (2012) wrote that there are several key concepts that provide the foundation for fidelity. These concepts are "The use of a partnership or participatory approach, the inclusion of multi-method and multi-informant data collection methods, and the use of performance feedback" (p. 348), and that these concepts are found across the three domains of assessment, instruction and intervention, and decisionmaking.

Summary of Literature

NASDSE provides a best practices procedure that outlines the development of RTI at the district level. The recommended process consists of three important steps: (a) building consensus; (b) building framework and infrastructure and, (c) implementation (Elliot &

Morrison, 2008). To achieve consensus, districts need to develop a shared vision that supports RTI as a general-education led, problem-solving model that promotes more productive and equitable outcomes for all students.

In the framework and infrastructure phase of RTI development, best practices suggest that districts adopt an RTI framework that contains all of the required components, and define their policies and procedures based upon the data compiled through a local needs-assessment that identifies the areas of need related to an RTI system. Districts need to identify the data-management system(s), and develop a plan for supporting the implementation of RTI through technical assistance and professional development (Elliot & Morrison, 2008). RTI systems are built upon the use of student data that informs instruction (O'Connor & Witter-Freeman, 2012).

The universal screening process should be as efficient and effective as possible to insure that schools can reliably predict and identify those students in need of such supports offered through RTI. A review of existing RTI frameworks indicates all elementary school students should be screened at least three times per year. The data obtained through the screening process should be used by the teachers to identify which students are falling behind and need support from RTI interventions (Brown-Chidsey & Steege, 2010). CBM tools such as DIBELS are quick and efficient, and provide adequate data about student achievement for decisionmaking (Riley-Tillman & Burns, 2009).

At the heart of Tier 1 is an evidenced-based core curriculum. Hughes and Dexter (2011) suggested that the use of an RTI model that supports scientific, evidence-based Tier 1 instruction effectively eliminates poor instruction as a reason for student failure to make adequate progress in the classroom as long as instruction and interventions are delivered with fidelity. Grouping is an essential tool for instruction when small groups are flexible and can change based upon the

needs of students. The Center on Instruction (2006) reported that “the most efficient way to increase the intensity of instruction for struggling readers is to provide instruction in small groups. That allows the instruction to be targeted to the specific needs of the students, and it allows the students to respond and receive feedback” (pp. 2-3).

Students who fail to make needed progress with Tier 1 instruction by itself should participate in Tier 2 intervention. Typically, Tier 2 involves providing small groups of no more than five or six students with an additional 30 minutes of instruction at least three times per week. Best practices suggest that Tier 2 groups be taught by a certified teacher or instructional aide who is able to effectively utilize a scientifically based instructional method. Tier 2 students are assessed monthly to weekly to evaluate progress towards local or state standards (Fuchs & Fuchs, 2005).

For students who do not make progress during Tier 2, the available frameworks recommend providing Tier 3 intervention. Such interventions are typically either in one-on-one, or in very small groups of no more than three children. Lack of progress in Tier 3 intervention could result in a referral for special education to rule out a specific learning disability or other condition that contributes to the student’s lack of progress. Should a team choose to make a referral to special education, evaluations must be individualized and comprehensive (Fuchs & Fuchs, 2005).

RTI is a promising and powerful tool for schools to use in their efforts to improve student academic outcomes, but implementation can have its challenges. There is a substantial and conclusive body of research that clearly identifies the details of what RTI programs should be: (a) high quality classroom instruction using evidence-based curricula and differentiation of instruction to support all learners, (b) tri-annual screening assessments designed to assess the

responsiveness of all learners in relation to the adopted curricula and to identify those students not progressing at the same rate over time as their peers, and (c) multiple levels of research-based intervention, delivered with fidelity and increasing intensity, in order to address the individual needs of students.

It is important to articulate clearly the differences among the three tiers of intervention and how students move between them. If the instructional intensity and interventions offered in Tiers 1, 2, and 3 do not increase or change, and if the interventions are not delivered with fidelity, the efforts to improve student achievement may be wasted. Best practices suggest that when implementing RTI, particular attention to the intensity of the strategies within the tiers of intervention is highly important (Mellard, McKnight, & Jordan, 2010). Measuring the fidelity of interventions is a vitally important aspect of the RTI process, and best practices suggest that schools should frequently and directly assess the fidelity of interventions to ensure that interventions are delivered as intended. To achieve the goal of fidelity, the NRCLD suggests that schools link interventions with outcomes; define responsibilities of personnel; clearly define intervention procedures and techniques; create a data system to measure intervention procedures; create a system for obtaining feedback about data-based decisions; and develop measures to assure accountability so that procedures are followed as written (National Research Center on Learning Disabilities, 2006).

CHAPTER 3: METHODOLOGY

Introduction

The purpose of this study was to examine the development and implementation of Response to Intervention in selected Maine schools in relation to best practices identified in research. While Maine mandated school districts develop and implement RTI in all grades by 2010, the state provided little support or guidance about how best to accomplish that goal. As a result, it is probable that Maine schools have utilized a variety of RTI procedures that may not reflect research-based best practices. Thus additional research related to the development and implementation of RTI in Maine schools was warranted.

As suggested in the previous chapter, there is a limited body of research about how schools have developed and implemented their RTI practices in relation to best practices. Thus, the primary goal of this study was to address that gap by examining the development and implementation of RTI in Maine schools in relation to the best practices identified in research. The results of this study provide the field with practical information about how selected school districts have developed, implemented, and evaluated their practices.

This chapter consists of two sections, the first of which attends to the development of a conceptual framework outlining best practices for developing and implementing RTI. RTI is commonly organized by the overarching principles of policy, program development and implementation and includes practices such as universal screening, data collection and analysis, a tiered system of student intervention, and methods for ensuring fidelity of instruction and intervention. A review of the literature led to the development of a conceptual framework of best practices for Maine schools.

The conceptual framework of best practices in the development and implementation of RTI is intended to provide the lens through which this researcher will: (a) explore policies, instruction and intervention practices, and assessments that are used by Maine schools in their development and implementation of RTI; (b) identify how school practices align with the framework of best practices in the development and implementation of RTI, and (c) describe the perceptions of administrators and teachers of the impact that RTI has had on their instructional practices, and for improving student outcomes.

The second section of this chapter is a description of the empirical inquiry of this research study, which includes an overview of the methodology chosen for this study. This chapter includes a description of the site and participant selection process, a description of how data were collected and analyzed, a description of the methods used to ensure the trustworthiness of this research study, and finally, the limitations of the study.

Methodological Overview

The goal of this study was to explore how Maine districts had developed and implemented RTI in relation to the best practices identified in the literature, as well as in relation to the requirements specified by the state of Maine. To achieve the goal of this study, a qualitative methodology was chosen. Qualitative research helps a researcher understand and interpret how participants perceive a specific event, what people really think about the event, and how they make sense of it (Merriam, 2009). A qualitative methodology was the best choice for this research because it allowed the researcher to understand how RTI was developed and implemented from the perspective of those most closely related to the work (i.e., administrators and teachers). All study procedures were reviewed and approved by the University of Southern Maine's Institutional Review Board (IRB) before any study procedures begin.

Site and Participant Selection

The setting in which RTI is best studied is in districts that have developed and implemented RTI. That setting affords the researcher the best opportunity to learn from the people responsible for developing, implementing and delivering RTI. For the purpose of this study, the researcher conducted research in two elementary schools that implemented RTI from kindergarten through fifth grade. The districts for this research were selected through purposeful network sampling (Merriam, 2009) that involved locating districts that were perceived, by regional professionals with knowledge about RTI and district implementation, to be successful in the implementation of RTI. For the purpose of this research, the definition of successful implementation means that districts have developed policies and implemented RTI programming in specific targeted grades, with all students.

For this study, two different school districts in Maine were identified as potential research sites. The superintendent of each identified district was contacted, and provided with a description of the study. Once permission was granted, written authorization to conduct research at the site was obtained from each superintendent. Elementary schools were chosen as the focus primarily because many districts began implementation of RTI at the elementary level, and programs at that level are believed to be the most widely and successfully implemented. The two districts that agreed to participate in this research are referred to as District A and District B. District A is a kindergarten through grade 12 school district with approximately 1,500 students located in southern Maine. District B is a considerably larger kindergarten through grade 12 school district with approximately 2,400 students located in central Maine.

Five participants from each district were chosen (administrators, teachers and/or teacher leaders who were responsible for RTI) through purposeful sampling. In District A, study

participants comprised a central office administrator, elementary principal, and three teachers/teacher leaders. In District B, study participants were a central office administrator, an elementary principal, and three teachers/teacher leaders. All participants were chosen upon the recommendation of district leaders, based upon the depth of their involvements with the development and/or implementation of RTI in their respective districts. In the participant-selection process, district leaders were asked to nominate personnel who were directly involved in the development of RTI policy and practices, as well as those responsible for the delivery of classroom instruction, assessments, interventions, and data collection and management. Each participant was provided with a written description of the study (Appendix A), and each participant provided informed consent prior to participation (Appendix B).

Austin RTI Frameworks

The Austin RTI frameworks were developed by the researcher and are based on a literature review of best practices in developing, supporting, and implementing RTI at the school level. The frameworks were used to examine and compare how two Maine elementary schools developed and implemented RTI in comparison to the best practices found in literature.

The Austin framework of best practices for developing and supporting RTI focuses on the actions of schools in developing a foundation for their RTI models. Interview questions related to the framework focus on important details such as how school personnel shared information, how the school wrote policy and procedure, and how the school built consensus that supported the implementation of RTI.

The Austin framework of best practice for implementing RTI focuses on the detailed process and procedures each school uses in their RTI programs. Interview questions related to the framework are intended to assist in obtaining detailed information about school practices

such as how schools: screen their children for learning problems; provide multi-tiered interventions; use data to make informed educational decisions; measure the fidelity of their assessments and interventions, and encourage and support parental involvement (See Appendices C and D for more information on the Austin Framework of Best Practices).

Data Sources and Collection

The data sources for examining the research questions of this study included individual in-depth interviews that guided participants toward a reconstruction of the RTI events (Seidman, 2013). Interviews were conducted in a focused, semi-structured format, using a three-part interview process (Seidman, 2013). The first interview focused on participant demographic information, and personal experiences in relation to the development and implementation of RTI (Appendix E). The second interview focused on the experience of the participants in the development and implementation of RTI in the school setting (Appendix F). The third interview focused on participant perceptions of the impact that RTI has had on instruction, and on improving student outcomes (Appendix G).

Each individual interview lasted approximately 45 to 60 minutes and occurred at a mutually agreed upon time and reminder email was sent prior to each interview session. Each interview was audio taped and transcribed verbatim by a reliable and reputable transcription service. Transcripts were coded and reviewed prior to the next interview to determine any additional questions or areas for exploration with the participant.

In addition to the in-depth interviews, existing documents were collected and reviewed to assist in uncovering the meaning, understanding, and insights regarding the development and implementation of RTI (Merriam, 2009). Copies of public documents such as district policies and procedures related to the development and implementation of RTI, and/or other documents

directly related to the development, design, and implementation of RTI at the site were requested and reviewed.

Data Analysis

As discussed previously, the purpose of this study was to examine the development and implementation of RTI through the lens of a framework of the best practices identified in the literature. Additionally, the study intended to gain understanding of teacher perceptions of the impact of RTI on instructional practices, and on improving student outcomes. After the transcripts were complete, any identifying information about the subjects or others at the site was removed or disguised.

The de-identified interview transcripts were analyzed using the qualitative data analysis software program, MAXQDA. The interviews for each site were analyzed separately. The transcripts were coded by theme, referencing specific quotes and statements. Constant comparative analysis (Merriam, 2009) was utilized to compare the similarities and differences in the data collected between respondents in each school setting, and then compared to the other school in the study, to analyze the alignment of each district with the selected framework of best practices.

Document analysis was used to validate the data collected through responses in the personal interviews, and to provide comprehension to the overall story. Public documents describing what the district did in the development and implementation of RTI were compared to the responses of participants. Existing documents were collected and analyzed through interpretive analysis, which focused on capturing the embedded meanings by looking at how messages were encoded or hidden in each document. Documents were analyzed for authenticity, credibility, representativeness, and meaning. For authenticity, the documents were analyzed to

determine if they were genuine, complete and reliable. For credibility, documents were analyzed to determine if they were error- and/or distortion-free. For representativeness, each document was analyzed to determine if the document was a true representative sample of the original document. Each document was analyzed to find the meaning of the document in relation to the practice of RTI in the schools. Documents were analyzed to confirm the responses of interviewees in regard to the research questions about RTI practices. Documents were reviewed and analyzed to confirm respondent descriptions of school policy, procedures, and practices.

Reliability and Validity

The researcher provided measures of validity within the constructs of Gruba's (1981) model for addressing trustworthiness in qualitative research. That model consists of research measures for internal validity, external validity/generalizability, reliability, and objectivity. Internal validity is measured to ensure that the research is credible, while external validity/generalizability is measured to ensure that results of a study are transferable from one setting to another. The reliability of research is measured to consider whether the results of the research are dependable, and objectivity measures are used to ensure the confirmability of the research. The credibility of the research is measured by the richness of the data collected. That is, in this case, a collection of data, and a review of documents, that are substantial enough to support findings. The focus of research credibility is on the quality of the data that leads to believable results. Document analysis and interview data were used to compare common policy, practice and procedures between the study sites, and in alignment with the best practices framework. To ensure transferability, the researcher conducted research in two separate sites to obtain a full and rich understanding of the common policy, practice and procedures between schools, and in relation to best practices. Similar data were collected in both sites and the

specifics related to the research questions were compared. If its specifics are comparable, a study has greater credibility. For dependability, the researcher ensured a complete and accurate description of the research design and the strategic manner in which the study was carried out. Finally, for confirmability, the researcher compared document evidence with response data to ensure that interview responses were an accurate reflection of RTI practices in the district.

Limitations of the Study

In conducting this research, there were a number of limitations. The Austin RTI best practices frameworks used in this research were specific to this study. They were based upon a search of existing literature pertaining to the development and implementation of RTI. The research is also limited to the review of existing documents, and to the perceptions of participants from two schools in Maine during one school year (2014-2015). Although there was some variation in the dates when participating districts implemented RTI, data were only collected from districts that achieved implementation of RTI in kindergarten through fifth grade, on or before the beginning of the 2012-2013 school year.

Definitions of Key Terminology

- **RTI** is a systematic, multi-tiered system of interventions designed to support and improve academic and behavioral outcomes for all students.
- **Districts with RTI Programs** are those schools and districts that have fully developed and implemented RTI in kindergarten through grade 12 on or before September, 2012.
- **Instructional Practices** are those practices employed by general education classroom teachers that address the needs of all learners.

- **Interventions** are scientifically and researched-based interventions which are rigorous, systematic, and have objective procedures to evaluate the effectiveness on improving student performance.
- **Fidelity/Treatment Integrity** is the extent to which an intervention is delivered as intended in adherence to its design features.
- **Best Practices** are practices and procedures that are found to produce desired outcomes.

CHAPTER 4: REVIEW OF THE FINDINGS OF POLICY, ASSESSMENT, INSTRUCTION, AND INTERVENTION

Introduction

The purpose of this research was to examine the development and implementation of RTI in relation to the best practices identified in research. The study examined the policies, instruction, assessment and intervention used in select Maine schools, and how those identified policies, instruction, assessment and interventions align with best practices identified in research. As discussed in earlier chapters, there was a lack of clear and decisive guidance to help Maine schools develop policy and frameworks that could support the successful development and implementation of response to intervention. The first section of this chapter contains the presentation of data and subsequent analysis of findings, and answers the research question: What are the policies, instruction, assessment, and intervention practices used by selected Maine schools in the development and implementation of response to intervention? The second section of this chapter is an examination of participant responses regarding RTI development, implementation, and the impact of RTI on instructional practices and student outcomes.

Policy, Instruction, Assessment, and Intervention

For this study, two districts were selected by word of mouth sampling and who self-reported that they had fully implemented RTI at the elementary school level. Across the two school districts, RTI has been fully implemented and has been a recognized part of the school culture for addressing the needs of students. In order to best understand how each district developed and implemented RTI, the focus of the chapter is to review the established policies, instruction, assessment, and intervention practices found within each district.

Policy

A review of existing policy in each district indicated that both districts adopted overarching policy relating to the development and implementation of RTI. The policies of each district are further explored below.

The school board of District A adopted Policy IHBAA: “Referral and Use of General Education Interventions” in 2013. In part, Policy IHBAA states that the “Superintendent of Schools, in consultation with the Director of Instructional Support/Special Services, may develop procedures for referral and the use of general education interventions.” In addition to Policy IHBAA, the board also developed and adopted Policy IHBAA-R, the regulation or administrative procedures for implementing IHBAA. The regulation for IHBAA clearly spells out the use of RTI in specific terms: “general education interventions are general education procedures involving regular benchmark assessment of all children who are at risk of failing. Children at risk receive responsive interventions in the general education program that attempt to resolve the presenting problems of concern.”

The school board of District B also adopted Policy IHBAA: “Referral and Use of General Education Interventions” in 2014. Presumably, as many districts adopt policy as recommended by the state, or a school management agency, the language of Policy IHBAA adopted in District B was very similar to the language found in Policy IHBAA adopted by District A.

Instruction

RTI in schools is most often focused upon student performance in the reading and math curricula. Therefore, the focus of this section will be a description of the reading and math instructional practices found in the two districts of the study. To assist the reader, the reading and math instructional practices are discussed and described individually, by district, below.

Reading Instruction

Study participants in District A reported that for elementary reading instruction, they use guided reading and leveled literacy components, which were developed by Dr. Irene Fountas (Lesley College) and Dr. Gay Su Pinnell (Ohio State University), as the basis for direct instruction. Fountas and Pinnell literacy instruction includes activities such as guided reading practice and leveled literacy intervention, which are designed to address the needs of struggling readers through small group, structured literacy lessons. One administrator in District A said that leveled literacy is used “predominantly” in grades K-4, and is supported by lead literacy teachers. “The lead literacy teachers are responsible for making sure that everyone is doing what they are supposed to be doing.” The lead literacy teachers in District A serve as “coaches” for the general education teachers.

Selected participants from District B reported that their reading instruction is based upon the materials of the Teachers College Reading and Writing Project (TCRWP), founded and directed by Professor Lucy Calkins. In grades K-3, reading instruction is supplemented with the Wilson Foundations program. For grades 4 and 5, District B reported that it provides literacy instruction that strikes a balance between whole language and phonics. One teacher leader described the process for adopting the current reading instruction as follows:

The TCRWP functions both as a think tank and a community of practice. Every Thursday for thirty years, the staff developers and leaders devote the entire day to participating in an intense, collaborative think-tank. Meanwhile lead teachers participate in many think tanks that last across years and contribute in important ways to the organization’s knowledge base (Columbia University, 2015).

One teacher leader described the process for adopting her district's current reading instruction in District B:

We've had a lot of staff development in the TCRWP. So that's what we are using for reading. We've had a lot (staff development in TCRWP), we've had Teachers College come in and give us staff development. We have literacy teacher leaders giving us staff development. We frequently meet as a district to discuss the reading and writing project.

Math Instruction

Study participants in District A reported that for elementary math instruction, the district uses the "Everyday Math" curriculum. Everyday Mathematics is a comprehensive Pre-K through Grade 6 mathematics program engineered for the Common Core State Standards. Developed by The University of Chicago School Mathematics Project, the Everyday Mathematics spiral curriculum continually reinforces abstract math concepts through concrete real-world applications (McGraw Hill Education, 2015).

A teacher leader described how the district came to use the Everyday Mathematics program:

In 2005 when I took this job we (the district) were using Investigations, but very kind of haphazardly. Everyone was teaching for different amounts of time. There wasn't a whole lot of commonality from classroom to classroom. The superintendent at the time decided we needed a more cohesive/comprehensive math program. We looked at Trailblazers, Everyday Math, and Investigations.

The teacher leader further explained that review sessions were attended by teachers and administrators with the end result being the selection of Everyday Math.

District B participants also reported using the Everyday Math curriculum. However, one participant in District B reflected that “we used it this year and just kind of patched it together for common core, but we’re switching to “enVisionMath.” Written specifically to address the Common Core State Standards, enVisionMath Common Core is based on critical foundational research and proven classroom results (Pearson, 2015). One teacher in District B reported that in regard to math instruction, “I’ll say in our school, literacy is definitely a priority for us. So we look primarily at literacy and then kind of secondarily at math.”

Assessment

Initial assessment in RTI is most often referred to as “universal screening” and is an important component of any RTI system. Universal screening is intended to monitor how well children are responding to instruction, and is also used to identify those children struggling to meet the established standards in the curriculum, and in need of RTI. The Universal Screening process used by both participating districts for reading and math is further explored below.

Universal Screening for Reading

All elementary students in District A participate in universal screening for reading in the fall and in the spring. In addition, students who are struggling during the fall months, or that were identified for RTI in the fall, are re-screened during the winter (typically January). Specifically for reading, District A participants reported that they use the Phonological Awareness Literacy Screening (PALS) and the Benchmark Assessment System (BAS). PALS is designed to identify students in need of additional reading instruction beyond what is typically provided. PALS also informs teachers’ instruction by providing explicit information about their students’ knowledge of literacy fundamentals (CaseNEX, 2015). The BAS was created by Fountas and Pinnell and is used in conjunction with the Fountas and Pinnell literacy instruction

to measure progress and identify those students struggling to meet standards. District A also utilizes the Northwest Evaluation Association Measure of Academic Progress (NWEA, MAP) to screen student performance in reading.

District A uses universal screening in order to determine which students are not meeting benchmarks for reading: performing at the 40th percentile, based upon local norms. In addition, District A uses a “validation” process in which teachers and administration meet to review and discuss individual student screening results to validate student performance on the assessments. If a child scores below the 40th percentile on the universal screening instruments, and the team of teachers and administrators validates that the scores are an accurate reflection of the student's overall performance in reading, then the student will qualify and receive RTI services. One teacher described the validation process as “meeting with the teams of teachers, and that’s called the validation process. The team looks at the information before the meeting and we literally go through the students one by one in order from the lowest score to the highest score. If it’s a special education student who’s already receiving services, that student is not discussed. We just indicate that the student already has a plan.” Another teacher said “the 40th percentile is our cut off as a district.”

Participants in District B reported that all children in elementary school are screened for reading progress three times a year (fall, winter, and spring). When RTI was implemented initially in their district, teachers in District B used a combination of “Running Records and DIBELS” to measure student reading progress. However, the district now uses “AIMSweb as their universal screening instrument, and more specifically, the AIMSweb Curriculum Based Measures of Reading and the Letter Sound Fluency assessments.

For the RTI identification process, District B reviews the normed target scores provided by AIMSweb. One teacher noted that the district as a whole reviews the results of the universal screenings and said that it is “an opportunity for teachers to work with their own data.” The teacher further elaborated that “then there’s a district-wide opportunity that everyone comes together and we look at the grade level data and the school data, and then we look at the district-wide data.” That allows for teachers to “make any suggestions about things they may need to look more closely at.” Once the universal screening data are reviewed, teachers “go back to their schools and spend the afternoon planning with interventionists.” One teacher reported that “based on AIMSweb, we’re looking at what the target is for that time of year, and what that grade level is. And we are looking for students that are typically just below what the target is set for that time of year.” One teacher reported that through the universal screening process and subsequent review, students are identified by color code, with green being on target, yellow being slightly below target, and red being substantially below target. Any students color-coded yellow or red are identified for RTI services. Although District B utilizes AIMSweb to assess student reading progress, teachers also use assessments that are built into the curriculum. One teacher described the process as “we might have a 2 week or a 3 week unit and then they give an assessment. A teacher would look at the assessment, [and] say there are 5 students that didn’t pass with 80%. The first thing they would do is ask somebody, is this, what does this look like?” The teacher further described a process in which the teachers “look at assessments together to figure out what exactly it was that the students couldn’t do.”

Universal Screening for Math

As described above for reading, District A universally screens all student in math twice per year (fall and spring) and screens selected students (i.e., those previously identified for RTI

services, or those who are struggling in the curriculum) an additional time in the winter.

Respondents in District A said that for math, they use “homemade assessments” and the NWEA, MAP. One teacher reported that in addition to the NWEA assessments, “there are 9 or 10 common assessments, common unit assessments during the year” that teachers are using with the Everyday Math program. “So the cumulative review is collecting accruing data on whether or not a student is remembering what they [sic] learned in November even though it is March. And that’s important as well.”

Consistent with the descriptions of universal screening above for reading, District B universally screens all elementary students three times per year (fall, winter and spring) utilizing AIMSweb Math Computation and Quantity Discrimination as universal screening assessments for math. An administrator in District B said that the district piloted AIMSweb three years ago and “full implementation two years ago. Prior to that, we were only screening for reading.” “So AIMSweb has worked out pretty well and typically what we do is we’ll print off a graph or we’ll move data from AIMSweb into a spreadsheet and kind of sit down and look at it. There are a couple of views on AIMSweb that have been helpful where they line up the sub-tests and then there’s an instructional recommendation for the kid. And then we have a conversation about that.”

Intervention

Both districts participating in this study reportedly provide three levels of reading and mathematics intervention to students who struggle to meet the established benchmarks of the curriculum relative to each subject. Those interventions are described, by district, tier, and subject, in the following section.

Reading Intervention Tier 1

In District A, Tier 1 intervention for RTI reading was described as classroom-based, and as the responsibility of classroom teachers. However, although RTI tier-terminology is used in the district, its Tier 1 process for reading has not clearly identified any specific intervention strategies, and the Tier 1 interventions have no specified time limits. One teacher said “the way I learned the model is that Tier 1 is the classroom instruction which includes differentiation. All students get that, but it (the curriculum) is differentiated based upon their needs.” Students in District A all receive support based on the results of their universal screening, and through the validation process mentioned above. If a student is struggling to meet the demands of the curriculum in Tier 1, yet scores above the 40th percentile, he or she would receive what was described as Tier 1 support in the classroom. A teacher leader noted that “through the validation process, we’ll say, hmmm no. Doesn’t look like that child needs this much of an intervention. It looks like this child needs just good solid practice.” Another teacher said that “Tier 1 are the kids that teachers just need to spend a little more time with. So, it’s really good teaching practices.” A District A administrator reported that Tier 1 intervention in District A is “primarily the classroom teacher and about differentiation.”

Similarly, District B respondents did not clearly identify any specific Tier 1 supports or reading intervention strategies beyond the general curriculum, and differentiated instruction of the general curriculum by classroom teachers. A district administrator in District B said that “Tier 1 is everybody, so all students are involved in some level unless they [sic] have an Individualized Education Plan (IEP) that has identified specialized instruction (special education) for them.” The district administrator described Tier 1 reading intervention as a “workshop model” in which, “a teacher is able to have students work in a guided mode or independent

mode, and he or she may be working directly with students that have that need (for Tier 1 intervention).” The administrator further said that “a workshop model allows the teacher to be able to meet students’ needs more directly. Call it differentiation if you want, but that lends itself nicely to a mini-lesson and then kind of break up the students by need.” One teacher noted some difficulty with teacher understanding of the RTI Tier 1 reading intervention process by saying “I think that there are teachers who still don’t really understand RTI. And, I think that it’s that kind of continuum. There are still teachers who kind of want to initially say, this student isn’t doing well, and they need to see someone else.”

Reading Intervention Tier 2

District A participants in this study were able to provide more descriptors of their Tier 2 reading interventions with better clarity than those described in Tier 1. A district administrator responsible for the oversight of RTI said that students are identified for Tier 2 RTI based on their performance on the universal screening “below the 40th percentile,” but not only their performance on the universal screening. As part of the validation process mentioned above, teachers and administrators discuss those students who scored below the 40th percentile and look at their performance on other assessments. Through that process, “it’s determined whether or not they’re candidates for intervention.” A teacher leader in District A described Tier 2 identification as “kids who need more than the teacher can give them in the classroom. They need just a little bit more. They need a smaller group. They need more re-teaching, they need just someone to give them a head start or a boost.”

For Tier 2 intervention, one teacher described what they provide for reading interventions; “we use the Leveled Literacy intervention system from Fountas and Pinnell” as described previously in this chapter. “We use Great Leaps.” The Great Leaps Reading program

“uses proven instructional tactics with powerful motivators to remediate a variety of reading problems” (Great Leaps, 2016). Participants in District A also reported that they use the Wilson Reading System, Read Live, and Lexia for Tier 2 reading interventions with students. The Wilson Reading System is a literacy program based on phonological-coding and Orton-Gillingham principles. The Lexia reading program consists of explicit, systematic and personalized learning activities in the six areas of reading instruction. In addition to the research-based reading interventions mentioned above, respondents in District A reported that they also do “various things for sight word intervention. A lot of them are just kind of home grown things, not a specific research-based program.”

When asked if there was a standard for time and frequency of interventions in Tier 2, the administrator in charge of RTI for District A responded by saying “no.” The administrator noted difficulties in the consistency in the delivery of interventions, which were reportedly heavily dependent upon schedules, available staff, and student needs. One teacher leader reported scheduling that is dependent upon students with similar needs being available at the same time. “That’s worked fairly well. But, then if I have a student who is really progressing faster, but not quite ready to be dismissed, you know, we’ve been in a little bit of a pigeon hole. So it comes down to differentiation.” In regard to the frequency of intervention, the teacher leader noted that “typically in literacy, it’s three days per-week for half an hour.”

Like District A, District B provided greater depth and detail in regard to the Tier 2 reading interventions provided to students. In District B, one participant described Tier 2 as “double dosing.” For those interventions “it’s like a modified lesson that really is focused on literacy. Leveled Literacy (Heinemann) is commonly used. We also have a Rasinski fluency intervention that we use.” The Rasinski fluency interventions focus on reading fluency as a

bridge to reading comprehension (Scientific Learning Corporation, 2015). In addition to the interventions mentioned above, one teacher noted that, “I have seen people that [sic] are trained using some of the Lindamood-Bell materials, LIPS (Lindamood-Bell Phoneme Sequencing) and Verbalizing and Visualizing.”

One teacher noted that there are differences in how Tier 2 interventions are delivered depending on the classroom. “So it looks different in different classrooms. Sometimes I’m pushing into classrooms and helping, conferring with students during reading or writing.” At other times, “I’m doing small group pull-outs for different things.” Some respondents said that there is some confusion about the types of Tier 2 reading interventions used in District B. “I would love to see more research-based interventions and strengthen that a bit. I think that our school does a really good job of meeting students’ needs, but when I meet as a district with other Title 1 teachers, I don’t feel like that some of the interventions are (research-based), they’re kind of hit or miss.” Another teacher said “I guess I see Leveled Literacy somewhat as more of a 3rd Tier intervention. I personally think it is misused in our district. I think some teachers are primarily using Leveled Literacy, and they’re not using it with fidelity, kind of using pieces of it. So sometimes, I struggle with Leveled Literacy as an intervention.”

One District B teacher said that reading intervention is delivered “pretty much by Title I and RTI learning strategists.” Another teacher said “I would consider all kids that I see in Title I to be (receiving) Tier 2.” In regard to frequency, teachers reported that they generally provide reading interventions to students “three or four times per week.” However, the frequency and duration of services is dependent upon staff availability and scheduling.

Reading Intervention Tier 3

In District A, there were no specific interventions identified solely for students in need of Tier 3 reading intervention. The process for identification, frequency, and duration of reading interventions has not been clearly defined. One teacher said that the definition of Tier 3 in District A is “somewhat vague. Some people consider Tier 3 intervention to just be more of what they (the students) are getting in Tier 2, increasing the frequency or reducing the group size.” Another teacher shared this about Tier 3: “I would say we consider that to be either the students who need significant RTI supports or students who are identified, you know, if our tiers include every single student in this school which is the model I tend to use, Tier 3 also includes special education students.” One teacher leader said “Tier 3 interventions are the children who haven’t made the progress we wanted them to make in Tier 2 and they are the ones who we think might need specific instruction” (clarified as specialized instruction through special education). In regard to the specific interventions provided, one administrator noted that “the interventions are not different than Tier 2 interventions, necessarily.” Elaborating further: “it’s really more, and it’s more individualized, is really what it is.” When asked what the differences were between Tier 2 and Tier 3 intervention, the administrator said that the differences are not “huge.” “We know there’s a difference, and we know that Tier 3 is possibly heading to a special education referral.” The most common response to the question about the difference between Tier 2 and Tier 3 reading intervention in District A referred to the duration and frequency in which the interventions are provided to the student, while using the same instructional strategies as outlined in Tier 2.

Teachers and administrators in District B most commonly noted that Tier 3 reading interventions generally involve an increase in the frequency and/or duration of the intervention.

Similar to District A, the intervention tools used by teachers in Tier 3 are the same as those used for Tier 2. One teacher from District B noted that Tier 3 “kicks in when a student is not making the progress that we want to see in Tier 2 and it basically moves them [sic] to 5 days a week (i.e., the frequency of intervention services).” An administrator in District B said that Tier 3 means “we’re getting closer now to individualization for students. So that might be probably greater frequency for kiddos.” As noted earlier, student interventions are delivered by Title I or RTI interventionists. But for Tier 3, one teacher said that “sometimes the literacy coach steps in at this point because they’re [sic] really trying to tease out what’s going on with this kid.” There was also some confusion noted between Tier 3 reading interventions and special education services, as one teacher said “I think there’s confusion between special education and Tier 3. I like to think of special education outside the [RTI] triangle; we’re looking at serious treatment resisters.” In reference to how and when students receive Tier 3 intervention, an administrator said “I’m not so sure there are consistent guidelines. It really comes down to often some capacity within the school of what the case load of that individual is and what they’re [sic] able to take on.”

Mathematics Intervention Tier 1

As noted in the description of District A’s Tier 1 interventions for reading, RTI was described as classroom-based and the responsibility of the classroom teacher. Similar to reading, the Tier 1 process for math intervention in District A was not clearly defined, did not identify specific intervention strategies, and had no identified time limits. Thus, Tier 1 interventions were limited to differentiated instruction as delivered by a classroom teacher, utilizing the approved curriculum. As is true with reading intervention, student progress in the math curriculum is assessed at least two times per year through universal screening, and through assessments built

into the curriculum itself. Students who do not meet the standards of the curriculum and/or fail to score at the 40th percentile on assessments, are referred to the validation process and potential additional support through Tier 2 RTI.

Study participants in District B reported that their focus for RT I is primarily on reading/literacy and only secondarily on mathematics. As with their Tier 1 reading intervention, respondents were not able to clearly identify specific Tier 1 math intervention strategies beyond the general curriculum, or supports beyond the differentiated instruction strategies applied by classroom teachers. As noted previously, a district administrator said that “Tier 1 is everybody, so all students are involved in some level unless they have an Individualized Education Plan that has identified specialized instruction (special education) for them.” The district administrator described Tier 1 math intervention in the same manner as reading intervention, as a “workshop model.”

Mathematics Intervention Tier 2

Unlike the multiple tools used for Tier 2 RTI reading intervention in District A, the tools used in Tier 2 mathematics intervention appear to be somewhat limited. Specific to math intervention, a teacher leader said that the district uses “tools developed by Professor Mahesh Sharma.” [Dr. Sharma is the director of the Center for Teaching / Learning of Mathematics in Framingham, Massachusetts, and developed Mathematics for All (Sharma, 2011)]. According to another teacher leader, the focus of math intervention in District A is on “place value and numeracy and literacy.” Consistent with District A’s reading intervention, RTI math intervention relies upon the capacity of staff and student/school schedules. Intervention frequency and duration inconsistencies were noted by a teacher who reported that sometimes the math interventionist

“takes her kids 2 times a week, for 45 minutes.” However, based upon the schedule, some math intervention is provided for “30 minutes, 3 days per week.”

As noted above, the focus of RTI in District B is on literacy/reading and not math. That is supported by the limited intervention tools/strategies reportedly used for RTI math intervention with students. In regard to the Tier 2 interventions provided to students, District B participants defined mathematics intervention that they are able to provide as a “double-dose” of classroom instruction, but did note one specific resource for the purpose. A District B administrator stated that the district used math solutions that accompanied the Everyday Math program.” Again, as noted above, the focus of District B’s RTI program is on literacy/reading. A district administrator reported that math intervention is based, at least in some part, on “capacity through our RTI strategists and our Title I staffing, whether again we’re able to do literacy and math or its just literacy.” Thus, RTI math intervention in District B is based upon teacher capacity, and only if time allows.

Mathematics Intervention Tier 3.

As was true with District A’s reading interventions, there were no specific interventions identified solely for the purpose of Tier 3 math intervention. The process for identification, frequency, and duration of math interventions were not clearly defined. Tier 3 interventions in math were the same as those used in Tier 2. However, the frequency and duration might increase, depending on teacher capacity and scheduling.

Similar to what participants in District B reported for Tier 1 math interventions, there were no specific interventions identified solely for the purpose of providing Tier 3 math intervention to students in District B. The process for identification, frequency, and duration of math interventions is not clearly defined. If any Tier 3 intervention is provided, it might include an

increase in duration and frequency, but the provision of Tier 3 interventions in math is dependent upon teacher capacity, and only if time allows. To that end, an administrator said “It really comes down to often some capacity within the school of what the case load of that individual is and what they’re [sic] able to take on.”

Impact on Instructional Practices and Student Outcomes

This third section of the analysis of findings is dedicated to a discussion of interview responses from teachers, teacher leaders, and administrators in regard to their impressions of the development and implementation of RTI, and about the impact that RTI has had on instructional practices and student outcomes in their respective districts. It is important to understand what teachers and administrators think or feel about RTI in a district in order to ensure appropriate support of the RTI program. That is, without teacher and administrator support, it is likely that any new initiative will fail to produce the desired outcomes.

In a review of the interviews, participants from both districts reported that the implementation of RTI had been relatively positive in their respective districts, but participants from each district also identified several barriers to their work. Additionally, participants from both districts reported that implementing consistent RTI practices had been a challenge, but that the process was still evolving. Those positive impressions and the identified barriers are separated by district and further discussed below.

Positive Impressions

In District A, teachers, teacher leaders, and administrators reported that the implementation of RTI had been positive. One teacher noted that, “I don’t see a lot of resistance to the intervention part of RTI because I think teachers are happy to get whatever extra support they can get for students who need it.” Another teacher said “I think it (RTI) brought more

awareness to reading instruction and kind of beyond teaching a book or teaching everyone the same thing. There's a lot more differentiation going on. And, there's a lot more discussion about skills that can contribute to a reader's growth." One teacher leader said "I think it's been positive to have a more formal implementation over the years. Another teacher said "regulation wise, I think you need to have a fair amount of meetings just to make sure everyone is on the same page. And that, I think, is an upgrade that we can have." An administrator said that there has been no resistance to the implementation of RTI. "The teachers see it" in regards to the good of RTI. "Maybe I am being a little protective of them, but I think there tends to be more of a fear that if they miss a kid, or if someone doesn't make enough progress, that they're going to be found guilty, at fault, or whatever. But, people here feel very positive about RTI."

Teachers, teacher leaders, and administrators in District B also reported that the implementation of RTI had been positive in their district. One teacher leader reported "I think that the way we started with universal screening was the way we had to. It really built a bridge for teachers." A teacher said

I think it was done perfectly. I mean, I think people didn't understand it, but I think because it was the way it was done and the way that it was done so incrementally, people weren't blind-sided and people weren't expected to lift something 100% year one, -- the fact that it was implemented slowly, we were allowed the book study, and we were allowed opportunity to look at, make our own decisions which were kind of really already made for us, -- so it was a guided discovery and I think it really enabled the staff to accept it differently than if, - sometimes when its top down there's a lot of digging in your heels, -- I don't think we had any of that.

Barriers and Challenges

One teacher in District A commented about the specific challenges related to RTI by saying “I definitely think we are still evolving. I mean, there are things - along the line there are things that we target in interventions that I would love to see also done in the classroom, but, - and some teachers do and some teachers don’t, it depends.” Although one teacher thought that meeting with colleagues about RTI is generally positive, she identified a challenge of RTI as “we’ve got a whole lot of initiatives on everyone’s plates and so it’s hard to find that time to meet.” One teacher leader said “there are things about it (RTI) that are not well defined. There’s some confusion about interventions that could be done in the classroom but are not done. I feel like every year I just have to clarify things over and over again.” Another teacher said “there’s an inconsistent application of the identification system I would say. And so, - and because of that, some teachers are more reluctant to refer students. Some teachers really want their students in [RTI] regardless of where they are priority wise, on the list. And so that makes it a little difficult - with special education there’s really a cut and dry [sic] rule for students are in or students are out. But, with RTI, there’s that gray area. So because of the gray area, I think we need to solidify the identification process.” Another teacher reported that “some people in the district feel that RTI has become a process that is more like special education.” Another teacher said “people don’t like change. I think we didn’t do enough, or any really, professional development around it.” One identified barrier about RTI was noted in relation to the limitations of children and their schedules. A teacher noted “the one thing that I think is too bad is that sometimes these kids are on a schedule and, you can’t meet today because you’ve got to do this. So it’s not always consistent.”

Individuals interviewed in District B also reported several barriers or challenges in relation to the implementation of RTI. One teacher leader said “it continues to evolve, I would say that we still are establishing some basics around RTI. I mean, certainly even job descriptions are still fuzzy, in terms of what is Title I and what is RTI.” Another teacher noted a negative response to student assessment in the school, “there’s certainly resistance to the amount of assessment, and so, it’s always a concern of teachers that they think there’s way too much assessment going on.” A teacher leader said “it feels like we’re scrambling to even bring any kind of consensus of understanding within the schools.” A teacher leader summarized the district's process for implementation of RTI in this way

I don’t know how other districts approached it, but there was pretty quick turnaround in terms of the state saying you need to do this and then us sort of getting started with it. So there’s the aspect of building the plane as you’re flying it. That’s sort of unavoidable, I think for any big initiative like this, that there might have been a little more stepped approach we could have done. And then I think just being able to work with other districts around the basic elements of RTI. More of that networking piece or collaborative planning amongst districts. Feeling a little bit less isolated would probably have helped.

An administrator said:

I think we’re at the point right now in our district of figuring out how the principles of the RTI system mesh with the principles of proficiency-based learning. I think the moral purpose behind both is the same. We feel like it is a better way to meet the needs of our kids. And so we’re organizing our schools differently to be able to meet those needs. So there’s a lot of overlap, but for some

people, it's still two worlds and I think probably at the state level, I don't want to speak out of turn, but I haven't seen those connections being made at the state level.

Impact on Instructional Practices

One teacher in District A said "I guess test scores show improvement. On the individual student basis we're always progress monitoring them and seeing the progress that they're making and whether they're making the progress we want them to be making." Another teacher said "I think there are lots of very positive things about the RTI process that we have. I think that universally screening everyone and not letting anyone slip by is really important. I think that then working on targeted interventions that can fill in certain gaps that kid might have missed or what not to help them start making more progress I think is really great." A district administrator responsible for RTI reported a perception that RTI has "been a positive thing for both reading and math at the K-4 level where explicit instruction is just so much more clearly in need."

In District B, one teacher said that a "huge positive [about RTI] is just really knowing more about where everyone is in the class." The teacher elaborated further by saying "I think that the assessments have really identified some of those critical areas that every child requires in order to progress appropriately." A teacher leader reported the perception that RTI has had a positive impact on teachers "I think it's been freeing in some ways for teachers where we're looking at different approaches – I think people are able to kind of think more flexibly and think kind of collaboratively – I think we'll be stronger together than we'll be just a group of individuals working on it." An administrator in District B reported that RTI has had a positive impact on student achievement and for encouraging teachers to work together. "Overall, I think we are meeting [the needs] of more kids than we than we did in the past. Another benefit really is

that I feel like special education and general education are working more in tandem.” One school leader suggested that since the implementation of RTI, “the biggest improvement has been in our core instruction. We’ve seen state assessment data rise in those two areas [math and reading].” That school leader also perceives that because of the strengthening of the core instruction, particularly in reading “we’ve seen to some extent, more kids meeting standards.” One teacher perceives that RTI is “changing education. I love the process of it. I think the collegiality of staff working with each other and brainstorming and talking about ideas and working together to help students make education a better place.” The teacher further elaborated:

I think that the opportunities for students that it offers is [sic] amazing. I love how people come together for RTI that might not necessarily come together. I’ve seen teachers being more intentional about meeting the needs of their students. Now I see the teachers more thinking, what can I do in my classroom to change? And then reaching out to their colleagues, how can we work together to help this student move as a reader?

Barriers and Challenges to Instructional Practices and Student Outcomes

One perceived challenge of RTI was the increase of required testing for all students. A District A administrator said “We’re assessing kids a lot. I mean its quick assessments, but the MAP (NWEA) test we do twice a year for everybody. Three times a year for kids that are on a Personalized Learning Plan for RTI. The one thing I think is too bad is that these kids are on a schedule,” meaning that it is difficult to get children consistently for intervention. A teacher leader noted a challenge in communication about RTI. “The only thing I would have us do better

is have more, probably more communication amongst ourselves that when we bring this information back to teachers, the teachers hear a similar message across the board.”

In District B, challenges were noted in the amount of time dedicated to RTI and financial concerns. One administrator said “It takes a lot of time. It takes a lot of time and a lot of energy and then the finances. So if that is all we had to do, then we could do it really, really, really well. But, it is the whole child we are trying to support and there are other demands for our times and needs. So that’s kind of a challenge that it presents.” One administrator reported mostly positive outcomes from RTI, but said “maybe a negative is we haven’t seen the kind of jump in achievement that we might have expected at first, or hoped for.”

Summary

Relative to the research question in this study “What are the policies, instruction, assessment and intervention practices used by selected Maine schools in the development and implementation of response to intervention?” teacher and administrator responses are summarized below.

Policy

Teachers and administrators from both districts in this reported that their districts had adopted overarching policy pertaining to the development and implementation of RTI. School boards in both districts adopted Policy, and the school board of District A also developed and adopted companion administrative procedures for implementing IHBAA. However, while the companion document to IHBAA more clearly spelled out the use of intervention for meeting the needs of children, the policy, nor the regulation, addressed the best practices associated with developing or implementing RTI.

Instruction

Study participants in District A reported that for elementary reading instruction, they implemented the guided reading and leveled literacy components that were developed by Fountas and Pinnell. It is important to note that the leveled literacy program is an intervention program that was designed to supplement the curriculum. Participants from District B reported that their elementary reading curriculum included the Wilson Foundations program for grades K-3 and a balanced literacy program for grade 4 and 5. District B reported that it emphasized instructional practices through support from the Teachers College Reading and Writing Project. Like District A, the reading programs implemented in District B were designed as interventions that supplement the curriculum. None of the programs that District A or B used for reading instruction were substantiated in research as evidence-based curricula. Participants from both districts reported that for elementary math instruction, their districts use the Everyday Math curriculum. Although Everyday Math is commonly implemented, the curriculum has not been substantiated as an evidence-based curriculum for all elementary grades.

Assessment

Both school districts reported a consistent process for universally screening students up to three times per year. And both districts reported a process for reviewing results of the screenings that involved teacher meetings and data review processes. The instruments utilized by each district were different, with one district using several instruments to assess literacy and using both commercial and “homemade” tools for assessing math. The other district utilized AIMSweb for screening students for both reading and math. For identifying students for RTI, one district reported that it identified children that scored below the 40th percentile on the screening instruments, and through a validation process. The other district used cutoff scores supplied by

the manufacturer of the assessment (AIMSweb) to identify which students were in need of RTI interventions.

Intervention

For Tier 1, both districts described interventions as classroom-based, and being the responsibility of the classroom teacher. Although RTI terminology is used in both districts, neither district's Tier 1 process for reading clearly identifies any specific intervention strategies, or specified time limits for typical interventions.

For Tier 2 reading intervention, District A uses Leveled Literacy, the Great Leaps Reading program, the Wilson Reading System, Read Live, and Lexia. Tier 2 intervention in District A were reported as typically being delivered three days per week, in half-hour sessions. District B described its interventions as a double dose of instruction using Leveled Literacy, Rasinski fluency interventions, and Lindamood-Bell LIPS and Verbalizing and Visualizing. Tier 2 interventions are delivered by both in class and out of class instruction, dependent upon the class and the needs of students. Teachers reported that they generally provide reading interventions to students 3 or 4 times per week, but the frequency and duration of services is dependent upon staff availability and scheduling.

For Tier 2 math intervention, District A provides intervention based upon materials of Mathematics for All. (Sharma, 2011). The focus of math intervention in District A is on place value and numeracy and literacy, with frequency and duration two or three times per week for a total of ninety minutes. For District B, the focus of RTI is on literacy/reading and not math. District B participants defined mathematics intervention as a double-dose of classroom instruction, with the support of materials that go with the Everyday Math program. RTI math intervention in District B is based upon teacher capacity, and is offered only if time allows.

In District A, there were no specific interventions identified solely for students in need of Tier 3 reading intervention. The process for identification, frequency, and duration of reading interventions was not clearly defined. In District B, teachers and administrators commonly noted that Tier 3 reading interventions involved an increase in the frequency and/or duration of intervention. The intervention tools used by teachers in Tier 3 are the same as those used for Tier 2.

District A was not able to clearly identify specific interventions it used solely for the purpose of Tier 3 math intervention, the process for identification, or the frequency, and duration of math interventions. In District A, Tier 3 interventions for math were reportedly the same tools as they use in Tier 2. The frequency and duration of intervention depend upon schedules and teacher capacity.

Respondents from District B also reported no specific Tier 3 math interventions. And, like District A, the process for identification, frequency, and duration of math interventions in District B was not clearly defined. The provision of Tier 3 interventions in math is dependent upon teacher capacity, and only if time allows.

Impact on Instruction and Student Outcomes

Despite the lack of guidance and resources from the state in regard to the development and implementation of RTI, the response from teachers, teacher leaders, and administrators was found to be generally positive in this study. There is recognition that there is much work to be done, but there is also a willingness to do it. Teachers enjoy the chance to collaborate with one another and to work closely with their colleagues in an effort to improve student performance. Teacher leaders and administrators appreciate the new focus on teaching strategies. Although there was some initial resistance from school personnel not directly involved in the development

and implementation of RTI, RTI is reportedly perceived to be accepted by most. And, regardless of how well the program developed in each district aligns to best practices, or the fact that the scores in one district have not improved, the overall response of those interviewed is that they believed that RTI has improved student learning.

CHAPTER 5: REVIEW OF FINDINGS IN RELATION TO THE ALIGNMENT OF IDENTIFIED PRACTICES WITH THE BEST PRACTICES OUTLINED IN THE AUSTIN FRAMEWORKS

Introduction

For this study, a framework of best practices for developing and supporting response to intervention was used to better understand how, and to what extent, research-based best practices align with the practices implemented by selected teachers and administrators. This chapter reviews the policies, instruction, assessment, and intervention practices used in select Maine schools in relation to the Austin Framework of Best Practices for Developing and Supporting RTI. The Austin Framework is an original framework developed for this study based upon the research of best practices. This chapter answers the research question: How do the identified practices align with best practices identified in research on the development and implementation of response to intervention?

Consensus Building

Sharing Information

The first overarching component of the Austin Framework of Best Practices is consensus building for supporting RTI. The best-practice indicators for consensus building are built first upon the provision of information about the rationale and procedures for RTI to internal and external stakeholders. Best practices suggest that districts adopt policy and a district vision that supports RTI, and which is shared with the school board, parent groups, community organizations, and other members of the community; the development of a district communication plan that includes personnel from multiple departments sharing information about RTI; and finally, evidence that the district built momentum for RTI through collaboration

with the school board, parent groups, community organizations, faculty and students. The current practices of each district are discussed below.

Policy and Vision Statement

This study suggested that District A does have existing policy (IHBA -- Referral and Use of General Education Interventions, 2014) that supports RTI in the district schools, and has a published vision statement, which aligns with the best practices outlined in the Austin Framework. This policy was created by the elected board of the school district, suggesting that the board had received information about RTI. In addition, District A created “Vision 2020: Planning for Student Success” (District:A, Vision 2020: Planning for Student Success, 2014). That report includes a vision of where the district wants to be in the year 2020, and was created in collaboration with parents, community members, school personnel, and school board personnel.

Results of this study suggested that District B does have a published policy that supports the use of RTI as a general education intervention for children struggling to meet the standards of the curriculum (IHBA -- Referral and Use of General Education Interventions, 2014). But District B does not have a vision statement that supports the development and implementation of RTI in the district.

Communication Plan

District A recently created a long-range vision statement that supports teaching and learning in the District. However, while Vision 2020 includes a plan for community engagement and communication, the plan does not include a plan for communicating information about RTI. District A does have a handout it provides for parents to communicate how it responds to children who struggle meeting the standards of the curriculum (District:A, Child Study Team). In

that document, the district states that the Child Study Team comprises: “Professionals sharing perspectives, expertise and resources to ensure the success of all children.” In interviews with respondents from District A, one teacher said that she was not aware of any specific plan for communicating information about RTI to parents or to the community. However, the teacher said “families know about the process [Child Study and RTI] when their children are involved in it and if they’re not, then they really don’t know anything about it.”

Results of this study indicated that District B does not have a written communication plan for sharing information about RTI, but the district did adopt Policy AD, “Educational Philosophy and Mission in 2013” (Policy:AD, 2013). The board noted “we believe that all schools must secure the involvement of the community, students, staff, parents, and citizens. We strongly believe that our school system’s success depends on good rapport and cooperation with our communities and its institutions.” Although District B has reportedly made attempts to communicate within its schools about the development and implementation of RTI, no evidence was found that the district communicated to parents or the community in general about RTI. One teacher reported “I first started learning as a parent [about RTI], I began asking questions to my building principal right away about RTI. And that’s how I got the information. I don’t know how the general teacher or parent is getting the information. I asked for it.” Another teacher said “I think it’s a mystery to people outside of the field of education in our community what RTI is.”

School Structures that Support RTI

The second component of consensus building in the Austin Framework is school structures that support RTI. The best-practice indicators for this section consist of written protocols that outline responsibilities for specific personnel in the development and implementation of RTI; clearly identified procedures for how key decisions are made, and those

responsible for decisions; how administration and faculty evaluate instructional practices and modify them as needed to prepare for the implementation of RTI (e.g., district-level review of curricula); whether administration and faculty examine and jointly adopt indicators to show the implementation of RTI, which would include teacher and staff evaluation systems; and, how school personnel review the costs associated with the implementation of RTI and budget accordingly to support its implementation.

Written Protocols

Results of this study suggest that District A has procedures designed specifically to support the RTI work in the district, but not necessarily in writing. When asked if the district had a written action plan, a teacher said “not that I know of. And I hope there isn’t one because if this is and I don’t know, then I failed.” Although a written action plan was apparently never developed, District A does have a Child Study Team brochure that outlines the process by which the school assesses, identifies, and intervenes with children who fail to meet the identified benchmarks of the curriculum and assessments. Even though there is no specific written action plan for developing, implementing or supporting RTI, the structures that support RTI in District A are known to school personnel. One teacher said

It wasn’t called an action plan per se. I think it sort of has morphed over the years into I’d say two or three years ago in the summer time we had a committee of teachers, --no, not teachers so much but special educators—principals and so on, lead teachers to develop a plan for both literacy and then the following year for math on what the universal screens would look like and so on and so we developed a process as we went along.

Another teacher added: “I suspect someone has put this all in writing. But for the most part, we are all following a procedure and protocol that I think the state wants us to follow.” A teacher leader added: “I can describe the RTI plan for the school more than know that (if a written plan exists), like I said, I think,--suffice it to say I believe there’s a written plan somewhere, but this is pretty much the protocol that we follow.”

Respondents in District B reported that a written action plan for RTI was completed in 2008, but that it was no longer being used. One teacher leader said: “there was a binder and it’s gone by the way. I haven’t seen it. That doesn’t mean it doesn’t exist.” Another teacher added: “it was very well spelled out.” One district administrator said that a written action plan was “already in place. And what we did two years ago I guess, was kind of revisit the plan that had been in place, and see what happened since the plan was developed.” When asked if the district was following any written plan for implementing or supporting RTI, one teacher leader reported that: “I would not say well at this point. I think each school has been operating RTI in a way that makes sense for them [sic].”

Decisionmaking

Participants from District A said that there was no written plan or protocol for how decisions were made in regard to RTI. However, respondents consistently reported that a central office administrator was responsible for the oversight of RTI, and they reported the use of a “validation process” in the school setting for determining which children received RTI services. The validation process was described by one teacher: “we have a meeting with the teams of teachers, and that’s called the validation process. The team looks at the information before the meeting and we literally go through the students one by one.” In regard to who makes decisions,

one teacher leader in District A said “If there’s any question about whether or not the child is going to get services, I have the final say on that.”

Similar to District A, participants in District B reported that they were not aware of any written plan or protocol for making decisions about RTI. However, respondents were able to identify that a central office administrator had oversight of RTI. At the building level, an administrator said that “the building administrator is the overseer of implementation.” Although not spelled out in the same way as the validation process in District A, respondents in District B consistently reported that teams of teachers review data and make decisions regarding which children would receive RTI Services.

Evaluation of Instruction and Implementation

In the process of developing RTI, District A personnel reviewed and modified their instructional practices to align with implementation of RTI in their district, and they adopted reading and math curricula to support student learning. Those curricula were implemented prior to the start of their RTI program. However, a best practice in supporting RTI is the development of indicators to measure progress in the implementation of RTI. District A did not develop formal indicators as part of the implementation process, but reported a process by which RTI has evolved over time, and that implementation was incremental. One teacher leader in District A said:

I remember this, we went over to the superintendent’s office, and we had meetings. This is what you’re going to do. You’re going to have the universal screen, you’re going to have the validation meetings, you’re going to have progress monitoring, and you’re going to have to set a benchmark. That’s what we did. I remember all that, yeah.”

District A did not include any part of RTI in their teacher-evaluation system. There is no specific budget for RTI in District A.

Like those from District A, participants from District B reported that they had reviewed and modified their instructional practices to support the implementation of RTI, and they adopted evidence-based curricula for both reading and math. However, respondents did not report any formal plan for developing formal indicators as part of their RTI program implementation. An administrator in the district described the process by which the implementation of RTI is being monitored. The administrator reported that a committee was formed, which consisted of “about 20 people, [with] at least one representative from each school in the district, and a lot of principals.” The committee met “three times per year” and “three times this year.” And, “it was really just kind of getting to some common understanding about what are the principles of an effective (RTI) system” and determining “what’s the gap between that [past practice] and what we are currently doing, and then kind of setting some plans for next year.”

Building and Supporting RTI

The third component of consensus building is building and supporting RTI. For the component, the best practice indicator outlined in the Austin Framework suggests that each district should have an RTI action plan that is consulted regularly in order to guide implementation. Results from each district are discussed below.

District A does not have a formal action plan that it used to implement and support RTI. However, one teacher reported that the district did have a plan. “It wasn’t an action plan per se. I think it has sort of morphed over the years.” The teacher elaborated that the district developed a committee comprising “special educators, principals, (and) lead teachers to develop a plan for

both literacy and then the following year for math on what the universal screening would be like and so on, and so we developed a process as we went along.”

Study participants in District B identified a handbook/binder that was developed by administration in or about 2008 that would support RTI. However, teachers and administrators also reported that the binder no longer reflected the practices of the district and is not used or consulted in the ongoing implementation of the RTI process. One teacher in District B said that the binder developed in 2008 “was great. It had it all; it had background of what RTI was.” At this point, District B does not have any written action plan or protocol that is followed by staff for the implementation of the components of RTI.

RTI Planning and Professional Development

The fourth and final component of consensus building is “planning and professional development.” The best practice indicator states that the school or district RTI plan includes details for professional development that supports RTI implementation.

District A did not have a written RTI action plan that included planning and professional development. However, even though a written plan doesn’t exist, teachers and administrators acknowledge consistent and ongoing professional development linked to the development and implementation of RTI in the district. One teacher reported:

Over the past 3 years, we’ve been working on implementing the common core standards and so we’ve done a lot of kind of curriculum review and we’ve implemented reading and writing workshop models through the teacher’s college reading and writing project. We’ve developed a scope and sequence of basically the Tier I instruction in the classroom at each grade level.

In regard to planned professional development, one teacher noted that “we have Monday meeting times where Mondays after school where we have professional development for an hour and a half, three out of four weeks per month. And one of those last year was a school psychologist who works in our district – he came and did a presentation about the brain and reading.” In reference to professional development that supported RTI development and implementation, one teacher leader said that the person in charge of RTI for District A “knew it was coming – really, I think it was a little bit ahead of the curve. And we had some professional development then, because we had been such separate entities. So really, we had to learn to work together. In regard to ongoing professional development, the teacher leader went on to report that “the lead teachers would work [with the central office administrator] to really understand what the law was.”

District B did not have a written plan for professional development that supports RTI. However, teachers and administrators acknowledge ongoing professional development that is connected to the development and implementation of RTI. A district administrator reported that “I think we invest quite heavily and financially in professional learning opportunities for our teachers. We also give teachers opportunities to come together throughout the year so we have weekly late starts that we utilize for that as well. It’s an ongoing process to keep people kind of with the latest and greatest.” One teacher leader summarized the ongoing professional development in District B as “training in the universal screening and progress monitoring, training and tracking interventions, I oversee the reading coaches in each of the elementary schools so I bring them together once every two weeks and we work together all day long, refining what is the practice district-wide.”

Components of RTI

The second overarching component of the Austin Framework of Best Practices is components of RTI. The indicators are built first upon high-quality instruction.

And the best practice indicators include the adoption of evidenced-based reading and math curricula.

High-Quality Reading and Math Instruction

Reading

Study participants in District A reported that for elementary reading instruction, they use guided reading and leveled literacy components for the basis of direct instruction. One administrator in District A said that leveled literacy is used “predominantly” in grades K-4, and is supported by lead literacy teachers. “The lead literacy teachers are responsible for making sure that everyone is doing what they are supposed to be doing.” The lead literacy teachers in District A serve as “coaches” for the general education teachers. Intended as a supplemental intervention, leveled literacy has not been substantiated in research as an evidence-based curriculum. It is generally used with small groups of students who have struggled in Tier 1 instruction.

Selected participants from District B reported that their elementary reading curriculum is based upon the materials of the Teachers College Reading and Writing Project (TCRWP), founded and directed by Professor Lucy Calkins. In grades K-3, reading instruction is supplemented with the Wilson “Foundations” program, and for grades 4 and 5, District B implemented a literacy curriculum that they described as a balance between whole language and phonics. The reading curriculum was adopted by the district following professional development with the TCRWP, and discussions among administration and staff. However, similar to District

A, the reading curricula that District B implemented have not been substantiated in research to qualify as an evidence-based curriculum.

Math

Study participants in District A reported that for elementary math instruction, the district uses the Everyday Math curriculum. One teacher leader described how the district came to use the program:

In 2005 when I took this job we (the district) were using Investigations, but very kind of haphazardly. Everyone was teaching for different amounts of time. There wasn't a whole lot of commonality from classroom to classroom." "We looked at Trailblazers, Everyday Math, and Investigations. The review sessions were attended by teachers and administrators with the end result being the selection of Everyday Math.

District B participants also reported that their district uses the Everyday Math curriculum as well. However, one participant district B reflected that "we used it this year and just kind of patched it together for common core, but we're switching to enVisionMath. One teacher in District B reported that in regard to math instruction: "I'll say in our school, literacy is definitely a priority for us. So we look primarily at literacy and then kind of secondarily at math."

Similar to the reading curricula adopted in District's A and B, the Everyday Math program that was adopted by both districts has not been substantiated in research to be an evidence-based curriculum, suitable for all elementary grades.

Universal Screening

The second category for the components of RTI is universal screening. The best practice indicators for the section are an established screening program to reliably assess and predict

those students in need of support through RTI; established procedures for screening all students in specified grades tri-annually; that screening protocols are consistently followed; that screening instruments are brief and reliable, as demonstrated by external data; and, tri-annual screening scores are reviewed to determine the effectiveness of instruction for all students and to plan interventions for select students.

Protocols/and Instruments

All elementary students in District A participate in universal screening for reading and math in the fall and again in the spring. In addition, students who are struggling or were qualified for RTI in the fall, are screened three times per year, with one screening added during the winter months. To assess reading, District A respondents said that they use the Phonological Awareness Literacy Screening and the Benchmark Assessment System. For math, they reportedly use “homemade assessments” and the Northwest Evaluation Association Measure of Academic Progress.

District B reported that the initial process for universal screening had been a combination of running records and DIBELS, but now the district utilizes AIMSweb to universally screen both reading and math. District B screens all students, three times per year, once in the fall, winter, and spring.

Effectiveness of Interventions

For identifying which students receive RTI services, District A uses universal screening and a validation process to determine which students are not meeting the benchmark set by the district, i.e., scores below the 40th percentile. Any student who scores below that percentile on the PALS, BAS, or the NWEA-MAP, is referred to the validation process to determine if the student qualifies for, and receives, RTI services. “The [validation] team looks at the information

before the meeting and we literally go through the students one by one in order from the lowest score to the highest score.” Another teacher said “the 40th percentile is our cut off as a district.”

For its RTI identification process, District B reviews student data that compares classroom and grade performance with performance on the AIMSweb assessment. One teacher noted that the district as a whole reviews the results of the universal screenings and said that “is an opportunity for teachers to work with their own data and then there’s a district-wide opportunity that everyone comes together and we look at the grade level data and the school data, and then we look at the district-wide data and talk about, does this make any suggestions about things that may need to look more closely at?” One teacher reported that: “based on AIMSweb, we’re looking at what the target is for that time of year and what that grade level is. And we are looking for students that are typically just below what the target is set for that time of year.”

Tier 1 Interventions

The third section of the components of RTI is Tier 1 intervention. The best practice indicators for this section indicate that the teachers in the school are provided training and professional development to ensure that the Tier 1 curricula are delivered with fidelity that ensures the integrity of instruction and intervention for all students; classroom teachers use data from both screenings and curriculum-embedded assessments to determine which students are not meeting benchmarks and in need of additional support. Within the classroom, teacher’s group students with others of similar need, and students are assessed at least monthly to determine progress toward benchmarks. For those students who fail to meet the benchmarks of the curriculum, the teacher refers the student for more intensive Tier 2 support.

In District A, Tier 1 interventions are classroom-based and the responsibility of the classroom teacher. The process in does not have specific criteria, intervention strategies, or time limits. Students in District A are identified for Tier 1 intervention based upon the results of their universal screening and through the validation process mentioned above. A District A administrator reported that Tier 1 intervention is “primarily the classroom teacher and about differentiation.” Teachers in District A receive training and feedback from teacher leaders in relation to Tier 1 instruction and intervention. A teacher leader said that in helping teachers: “I try encouragement. I try explaining and re-explaining why we do things the way we do. And I also inform the principal and she will kind of follow-up and follow through.” Prior to fully implementing RTI in District A, the district invested in professional development for both reading and math. “We had sort of an expert in RTI come for literacy. We had a five day, week long [session of] professional development and then we had the same for math. That professional development occurred five years ago for reading and four years ago for math.”

Although teachers have had substantial professional development and support for Tier 1 intervention, teachers and administrators in district were unable to identify any Tier 1 interventions beyond differentiated instruction.

Respondents in District B reported that Tier 1 interventions are for all children, but were not able to identify any specific Tier 1 interventions beyond differentiated instruction. An administrator in District B said that “Tier 1 is everybody, so all students are involved in some level unless they have an IEP that has identified specialized instruction for them.” The administrator described their method of intervention as a “workshop model:”

A teacher is able to have students work in a guided mode or independent mode, and he or she may be working directly with students that have that (similar) need.

A workshop model allows the teacher to be able to meet students' needs more directly. Call it differentiation if you want, but that lends itself nicely to a mini-lesson.

Although District B utilizes universal screening to help identify those students who might need additional support in the curriculum of Tier 1, teachers also use assessments embedded in the curriculum to make those decisions. One teacher described a process in which the teachers "look at assessments together to figure out what exactly it was that the students couldn't do." While District B utilizes assessment and group review in the process of identifying students who might need additional support in the curriculum, one teacher noted some difficulty with teacher understanding of the process: "I think that there are teachers who still don't really understand RTI."

Tier 2 Interventions

The fourth component of RTI is Tier 2 interventions. Best practices for RTI indicate that the school identifies evidenced-based interventions, and the personnel that are responsible for the provision of these interventions. The school provides training to ensure that interventions are delivered as intended with fidelity; ensures that students are placed in groups of no more than five children with similar learning needs; and that intervention is provided in addition to the core Tier 1 instruction. Interventions are provided in small groups at least three times per week for 30-minute sessions; progress is assessed at least monthly to determine the growth rate over time as compared to peers; and, if students are not making timely, desired progress, they are referred to Tier 3 support.

In District A, the district administrator responsible for the oversight of RTI said that students are nominated for Tier 2 based upon their performance on the universal screening

“below the 40th percentile,” and as part of the validation process mentioned above, performance on other assessments. Through that process, “it’s determined whether or not they’re candidates for intervention.” A teacher leader in District A described Tier 2 identification as “kids who need more than the teacher can give them in the classroom. They need just a little bit more. They need a smaller group. They need more re-teaching, they need just someone to give them a head start or a boost.” One teacher described the interventions for reading:

We use the Leveled Literacy intervention system from Fountas and Pinnell. We use Great Leaps, we use the Wilson Reading system or materials associated with it. We use Read Live, which is a computer program put out by Read Naturally. We use Lexia, which is a computer program that works on phonics skills. We do various things for sight word intervention. A lot of them are just kind of home-grown things, not a specific research-based program.

For math, one teacher leader said: “[we] use a lot of tools developed by Professor Mahesh Sharma,” director of the Center for Teaching / Learning of Mathematics in Framingham, Massachusetts, and developer of “Mathematics for All.”

Overall, there was little consistency noted in the delivery of Tier 2 intervention in District A, which was heavily dependent upon schedules, available staff, and student needs. For frequency of intervention, a teacher leader noted that “typically in literacy, it’s three days per week for half an hour.” For math intervention, a teacher reported that the math interventionist provides intervention for ninety minutes each week, either in two sessions per week for 45 minutes sessions, or three sessions per week for 30 minutes each session.

In District B, a study participant described Tier 2 as “double dosing.” For those interventions “it’s like a modified lesson that really is focused on literacy. Leveled Literacy is

commonly used. We also have a Rasinski fluency intervention that we use.” (Rasinski fluency interventions were developed by Timothy Rasinski, Ph.D., a professor at Kent State University.) In addition to the interventions mentioned above, the teacher added, “I have seen people that are trained using some of the Lindamood Bell materials, and Verbalizing and Visualizing.” An administrator noted that interventions are based, at least in some part, on “capacity through our RTI strategists and our Title 1 staffing, whether again we’re able to do literacy and math or its just literacy.” One teacher noted that there are differences in how Tier 2 interventions are delivered depending on the classroom. “So it looks different in different classrooms. Sometimes I’m pushing into classrooms and helping, conferring with students during reading or writing.” At other times, the teacher reported “I’m doing small group pull-outs for different things.”

District B uses Leveled Literacy as part of their Tier 2 interventions for reading, and Math Solutions for math intervention. Tier 2 interventions are reportedly delivered by Title 1 and RTI learning strategists. Regardless of the interventionists, teachers reported that they all “for the most part, are using curriculum-based measurements every two to three weeks [for progress monitoring]. They tend to meet with kids three or four times per week.”

Tier 3 Interventions

Tier 3 Intervention is the fifth section of the components of RTI. Best practices in Tier 3 state that those students not responding to Tier 2 intervention are provided with highly intensive interventions, delivered by trained personnel; intervention is provided daily in either one-on-one or in very small groups that are no larger than three students; student progress is measured weekly with a measure aligned to the intervention; student data are reviewed at regular intervals of not more than every three weeks; and, students whose data show a persistent lack of progress

despite interventions are referred to special education in accordance with state and federal special education regulations.

In District A, there were no specific interventions identified solely for students in need of Tier 3 reading intervention. The process for identification, frequency, and duration of reading interventions had not been clearly defined. One teacher said that the definition of Tier 3 in District A is “somewhat vague. Some people consider Tier 3 intervention to just be more of what they [the students] are getting in Tier 2, increasing the frequency or reducing the group size.”

Another teacher shared the following about Tier 3:

I would say we consider that to be either the students who need significant RTI supports or students who are identified, you know, if our tiers include every single student in this school which is the model I tend to use, Tier 3 also includes special education students. Tier 3 interventions are the children who haven’t made the progress we wanted them to make in Tier 2 and they are the ones who we think, might need specific instruction [clarified as specialized instruction through special education].

One administrator noted that “the Tier 3 interventions are not different than Tier 2 interventions, necessarily, it’s really more, and it’s more individualized, is really what it is.”

As was true with District A’s reading interventions, District B had no specific interventions identified solely for the purpose of Tier 3 math intervention. The process for identification, frequency, and duration of math interventions were not clearly defined. Tier 3 interventions in math utilize the same tools for Tier 3 as does Tier 2. However, the frequency and duration might increase, dependent upon the schedule and teacher capacity.

Teachers and administrators in District B most commonly noted that Tier 3 reading interventions generally involve an increase in the frequency and/or duration of the intervention. Similar to District A, the intervention tools used by teachers in Tier 3 were the same as those used for Tier 2. One teacher from District B noted that Tier 3 “kicks in when a student is not making the progress that we want to see in Tier 2 and it basically moves them to five days a week (i.e., the frequency of intervention services).” An administrator in District B said that Tier 3 means “we’re getting closer now to individualization for students. So that might be probably greater frequency for kiddos.” For Tier 3, one teacher said that “sometimes the literacy coach steps in at this point because they’re really trying to tease out what’s going on with this kid.” In reference to how and when students receive Tier 3 intervention, an administrator said “I’m not so sure there are consistent guidelines. It really comes down to often some capacity within the school of what the case load of that individual is and what they’re [sic] able to take on.”

District B had not identified specific interventions solely for the purpose of providing Tier 3 math intervention to students. The process for identification, intervention frequency, and duration of math interventions were not clearly defined either. If any Tier 3 intervention is provided, it would likely include an increase in the duration and frequency of intervention, but the provision of Tier 3 interventions in math is dependent upon teacher capacity, and only if time allows.

Measuring Fidelity

The sixth section of Components of RTI is measuring fidelity. Best practices suggest that a district/school directly and frequently assesses the fidelity of interventions through monthly checks to ensure that the curricula and interventions are delivered strictly as intended. The importance of teaching the curriculum as designed cannot be overstated. Intervention fidelity

“refers to teaching with accuracy; that is, content is instructed exactly the way it was designed in the curriculum” (Brown-Chidsey, Bronaugh, & McGraw, RTI in the Classroom, 2009, p. 40).

The authors also suggest that following the curriculum is akin to following a recipe in cooking, recognizing that following the recipe exactly as it is written ensures the best possible outcome.

Keller-Margulis (2012) wrote that measuring fidelity is critical to ensure that assessment, instruction and intervention, and the decision-making process of an RTI model are effective.

When considering fidelity monitoring, Keller-Margulis suggested that RTI teams consider if their universal screening occurs three times per year at regular intervals; that there are procedures in place to ensure the accuracy of universal screening; and that there are procedures in place for ensuring that all new staff are trained, existing staff are retrained, and all staff are accurately documenting the reliability of assessment administration. For instructional and intervention fidelity, Keller-Margulis suggested that RTI teams consider if the core curriculum is being delivered as designed; if there are procedures in place for measuring implementation of the curriculum and intervention; and if students are receiving the frequency and duration of the instruction as intended. For the decision-making process, Keller-Margulis suggested that RTI teams consider if teams review universal screening data; if universal screening data is used to identify students who might require additional support and intervention; and, if there are procedures in place for determining how universal screening data are used to identify which students receive additional support (Keller-Margulis, 2012)

The results of this study suggest District A personnel are attempting to ensure that interventions are delivered with fidelity. Teachers, teacher leaders, and administration reported multiple ways in which they attempt to ensure the fidelity of interventions in their district. One teacher leader said “I meet with education technicians weekly for a consult session and I work

with them on the interventions. I train them so I know what they are doing the same thing I am doing.” In addition, the teacher leader added “they’re also in the same room with me so I can hear them. So that if there are any issues that come up I can bring it up.” A teacher noted that “there are always hints as to whether or not it’s being delivered with fidelity.” In particular, the teacher spoke about those teachers who would say things such as “well, I don’t like this; I’m not going to do this; or, I don’t like that. And they were honest about it for the most part, but you know, sometimes they’d just close their door and do something a little different.” The teacher concluded “I think the way to ensure fidelity is to have facilitated team meetings where you’re talking about that all the time. And you’re having teachers bring student work.” Another teacher leader noted in regards to ensuring fidelity “I’d say much of that is training that they’ve [teachers] received through our team meetings. So there’s a lot of professional development around that in our team meetings and also on how to teach and what that should look like.” One teacher leader reported that “the lead teachers are responsible for that [ensuring fidelity]; making sure that everyone is doing what they’re supposed to be doing; making sure that this is the purpose of it. They say, here are the books, this is how we do it, this is how you administer a BAS [for example].” A district administrator said “I really think that we’re in a place where there’s a high awareness of fidelity and that’s a big move that has been from not just site-based management, but classroom-based decisions about how and what I’m going to teach.”

In District B, teachers, teacher leaders, and administration also reported that they attempt to monitor the fidelity of their interventions, but it was also said that they are finding it difficult to do so. One teacher leader said “I rely on the literacy teacher quite a bit for those recommendations. If there’s a concern, I’d probably go in and observe and then that would be part of the supervision and evaluation process.” One teacher said:

We're fortunate we have a small school with just two teachers per grade level. We can meet regularly. We also have our literacy teacher who is at our school, is very involved. She goes to every weekly PLG [sic] meeting. Our principal also is involved. So, there's no place to hide for teachers. There's no 'I'm going to close my door and teach however I want.' We look at data regularly, so I feel like it's open door. We just talk a lot as a staff.

One teacher leader in District B said honestly "it's hard to monitor fidelity. A lot of teachers will sort of [say they] do it my way and go off with a program that designed to do x, y, or z and sort of, well they have always done it this way, and they modify the program and then they're quick to say, see, it didn't work."

Parental Collaboration

The seventh and final section of the components of RTI is parent collaboration. Best practices for parent collaboration consist of giving parents general information about RTI support and how student progress is measured; parents are informed when a student is referred to Tier 2 and/or Tier 3 and are invited to participate in the decision-making process; and finally, parents are provided with information about their parental rights in accordance with federal and state special education regulations. Byrd writes that involving parents in the RTI process is important because RTI can be confusing, and parents can feel left out because they don't understand the jargon that educators use. Additionally, it is important to involve parents in the process because the provision of RTI could lead to a referral for special education. As it is mandatory that parents be involved in every aspect of the special education process, it would make sense to involve parents in the RTI process that could ultimately lead to that referral. Finally, parents should be involved in the RTI process because research has shown that when

schools involve parents, the outcomes for both students and parents are positive (Byrd, 2011). It is important to note that while there is no requirement that parents be part of the decision-making or planning process, all parents must be informed that their child is being provided RTI support.

Respondents from District A reported that their district has an established process by which they communicate with parents of students identified and receiving RTI services. However, parents have not been directly involved in the RTI planning, implementation, or decision-making process. One teacher explained that “whenever a student is identified to have a Personal Learning Plan (PLP) through RTI, we send home a letter to parents to notify them of that. And along with that letter, they get the pamphlet that describes the response to intervention.” One teacher leader said that through the Child Study Team and validation process “we do have, we have not done it this year, but we have had parent meetings before where we have explained what we’re doing. We send letters home so that the parents are aware of what we are doing.” Another teacher said that “families are involved in the process when their students are part of the process.” A teacher leader in District A said:

At mid-year we assess again. And for some students we decide that they no longer need the supports and communication is made to the parents as well. And some students who need continued support, communication is made to parents. And then, twice a year, we send progress reports out to parents explaining how the students are doing. So, we give an overview of what we’ve been doing and how the student is doing within the system.

District A does follow federal and state regulations for informing parents of their rights in regards to special education.

Similarly, respondents in District B also said that they have a process for communicating with parents of students who have been identified and are receiving RTI services, but also that parents had not been part of the planning, implementation, or decision-making process. In District B, teachers reported that they send letters home to parents regarding the RTI process. “It’s like (a) welcome to RTI kind of letter. In Title I and RTI, we never see a kid without a letter.” Outside of letters to parents, District B has an extensive set of meetings to discuss student performance and data regarding intervention progress. Although they discuss students regularly, parents are not involved in the planning or decision-making process.

Summary

Relative to the research question in this study “How do the identified practices align with best practices identified in research on the development and implementation of response to intervention?” findings suggested that both school districts had strengths and weaknesses when comparing their current practices to the Austin Framework of Best Practices for Developing and Supporting RTI.

Consensus Building

The first overarching component of the Austin Framework of Best Practices is consensus building for supporting RTI. In review of existing documents and interviews with respondents in both Districts A and B, findings suggested similarities and differences.

Sharing Information

Both districts in this study have adopted policy IHBAA – Referral and Use of General Education Interventions. In addition, District A also create Vision 2020: Planning for Student Success-(District:A, Vision 2020: Planning for Student Success, 2014). It includes a vision of where the district wants to be in the year 2020, and was created in collaboration with parents,

community members, school personnel, and school board personnel. District B had not created a vision specifically addressing student intervention at the time of this study.

District A recently created a long-range vision that supports teaching and learning in the district. However, while “Vision 2020” in District A includes a plan for community engagement and communication, the plan does not include a plan for communicating information about RTI. In addition, District A provides a handout for parents to communicate how it responds to children who struggle to meet the standards of the curriculum (District:A, Child Study Team). District B does not have a specific written communication plan, but as discussed previously, in 2013, it adopted the Educational Philosophy and Mission (Policy:AD, 2013). In the policy, the school board writes “we believe that all schools must secure the involvement of the community, students, staff, parents, and citizens. We strongly believe that our school system’s success depends on good rapport and cooperation with our communities and its institutions.”

School Structures that Support RTI

The second component of consensus building in the Austin Framework is school structures that support RTI. District A has procedures that were designed specifically to support the RTI work in the district, but are not necessarily in writing. Although a written action plan was apparently never developed, District A does have a Child Study Team brochure that outlines the process in which the school assesses, identifies, and intervenes with children who fail to meet the identified benchmarks of the curriculum and assessments. Respondents in District B reported that a written action plan for RTI was completed in 2008, but that it was no longer being used. Nonetheless, and despite a lack of formally developed protocols, district leaders and teachers meet regularly to discuss the RTI process across the district.

Neither district in this study has a written plan or protocol for how decisions are made, or for who makes them in relation to RTI. However, respondents in each district were able to describe the administrative support structure of RTI and how decisions are made. In District A, respondents consistently reported that a central office administrator was responsible for the oversight of RTI, and the use of a validation process in the school setting. The validation process team looks at assessment information for all students. In District B, respondents were also able to identify that a central office administrator had oversight of RTI. At the building level, an administrator said that “the building administrator is the overseer of implementation.” Although not spelled out such as the validation process in District A, respondents in District B consistently reported that teams of teachers would review data and make decisions regarding which children would receive RTI Services.

A review of documents and results of participant interviews revealed that both Districts A and B had reviewed and modified their instructional practices in order to implement RTI. Both districts had reviewed their curricula and adopted curricula prior to the start of RTI programming. However, as noted above, the reading and math curricula adopted in both districts have not been substantiated in research to qualify as evidence-based curricula.

Building and Supporting RTI

The third component of consensus building is building and supporting RTI. For that component, the best practice indicator in the Austin Framework requires that each district have an RTI action plan that is consulted regularly to guide implementation.

District A does not have a formal action plan that it used to implement and support RTI. However, one teacher reported that the district did have a plan. “It wasn’t an action plan per se. I think it has sort of morphed over the years.” Participants from District B identified a

handbook/binder that was developed by administration in or about 2008 that would support RTI. However, teachers and administrators reported that the binder no longer reflected the practices of the district and is not used or consulted in the ongoing implementation of the RTI process.

Planning and Professional Development

The fourth and final component of consensus building is planning and professional development. Its best practice indicator states that the school or district RTI plan includes details for professional development that supports RTI implementation.

The results of this study suggest that neither district that participated in this study had a written RTI action plan that included a specific plan for professional development. However, teachers and administrators from both districts acknowledged consistent and ongoing professional development linked to the development and implementation of RTI in their respective districts.

Components of RTI

High-Quality Instruction

The second overarching component of the Austin Framework of Best Practices is components of RTI. The indicators for the components of RTI are built first upon high-quality instruction. For that, the best practice indicators include the adoption of evidenced-based reading and math curricula. As discussed previously in this chapter, the results of this study suggest that both districts adopted new reading and math curricula, but it is important to note that the curricula of both districts for reading and math do not meet the criteria for efficacy as high-quality Tier 1 instruction.

Reading

Study participants in District A reported that for elementary reading instruction, they use guided reading and leveled literacy components for the basis of direct instruction. District B reported that the elementary reading curriculum is a combination of the Wilson Foundations program for kindergarten through grade three, and a Balanced Literacy program for grades four and five.

Math

Results of this study suggested that both districts in this study have adopted the Everyday Math Curriculum at the elementary level. However, although District B is currently using Everyday Math, respondents reported that for the coming year, the district would be switching to enVisionMath

Universal Screening

All elementary students in District A participate in universal screening for reading and math in the fall and again in the spring. In addition, students who are struggling or have been qualified for RTI in the fall, are screened three times per year, with one screening added during the winter months. To assess reading, District A utilizes the Phonological Awareness Literacy Screening (PALS) and the Benchmark Assessment System (BAP). For math, they reportedly use “homemade assessments” and the Northwest Evaluation Association Measure of Academic Progress (NWEA-MAP). In District B, all students are assessed three times per year (fall, winter, and spring). AIMSweb is used in District B to universally screen both reading and math.

Use of Screening Scores

District A uses universal screening and a validation process to determine which students are not meeting the benchmark set by the district, which are scores below the 40th percentile. That means that any student who scores below the 40th percentile on the PALS, BAS, or the NWEA-

MAP, is referred to the validation process to determine if the student qualifies and receives RTI intervention. District B reviews the normed target scores of AIMSweb, which are discussed by teams of teachers and administrators, to determine the supports necessary for individual students.

Tier 1 Intervention. Respondents from Districts A and B identified that Tier 1 intervention is the responsibility of the classroom teacher, and was mainly described as differentiated instruction. Neither district had any written criteria for identification, intervention strategies, or time limits associated with Tier 1 interventions.

Tier 2 Intervention. In District A, Tier 2 RTI is based upon student performance on the universal screening at or below the 40th percentile. In addition, District A utilizes a validation process for determining if a student score below the 40th percentile is an accurate reflection of the student's true academic performance. Although a student could be identified for Tier 2 intervention, the results of this study suggested that, in District A, there was little consistency noted in the delivery of Tier 2 interventions, which are heavily dependent upon schedules, available staff, and student needs. The typical frequency and duration of Tier 2 reading interventions in District A is three days per week for half an hour each session. For Tier 2 math intervention, the frequency and duration of intervention ranges from 2-3 times per week for 30 to 45 minutes per session. Once again, interventions are heavily dependent upon schedules, available staff, and student need.

In District B, a study participant described Tier 2 as “double dosing.” Leveled Literacy is commonly used for reading intervention. District B also utilizes a Rasinski fluency intervention, and Lindamood Bell materials. Tier 2 interventions are reportedly delivered by Title I and RTI learning strategists. Teachers reported that intervention is delivered three or four times per week.

Tier 3 Intervention. Best practices in Tier 3 insist that those students not responding to Tier 2 intervention are provided with highly intensive interventions, delivered by trained personnel; intervention is provided daily in either one-on-one or in very small groups no larger than three students. In both Districts A and B, there were no specific interventions identified solely for students in need of Tier 3 reading or math interventions beyond those tools identified for Tier 2 interventions. The process for identification, frequency, and duration of reading or math interventions were not clearly defined at the time of this study, but a general understanding in both districts is that Tier 3 interventions involves greater intensity and duration.

Measuring Fidelity

Best practices suggest that a district/school directly and frequently assess the fidelity of assessment, instruction and intervention, and the RTI decision-making process. For assessment, Keller-Margulis (2012) suggested that RTI teams consider if universal screening occurs three times per year at regular intervals; that there are procedures in place to ensure the accuracy of universal screening; and that there are procedures in place for ensuring that all new staff are trained, existing staff are retrained, and all staff are accurately documenting the reliability of assessment administration. The results of this study suggested that District A screens all children two times per year (fall and spring), and that children who are already receiving intervention, or those that are struggling in the curriculum, are screened an additional time during the winter. In District B, all children are screened three times per year (fall, winter, and spring). Neither district reported any procedures for training new or existing staff in the reliability of assessment intervention. However, both districts reported procedures for reviewing the results of universal screening, and criteria for determining which children receive additional RTI support and intervention.

Regarding the fidelity of instruction and intervention, Keller-Margulis (2012) suggested that RTI teams consider whether the core curriculum is being delivered as designed; if there are procedures in place for measuring implementation of the curriculum and intervention; and whether students are receiving the frequency and duration of the instruction as intended. The results of this study suggest that District A is attempting to ensure that instruction and interventions are delivered as designed. One teacher reported that in weekly consultation meetings with educational technicians, the technicians are trained to deliver interventions. Those technicians are also observed regularly to ensure they are delivering intervention as taught. In District B, teachers, teacher leaders, and administration also attempt to monitor the fidelity of their interventions, but report that they are finding it difficult to do so. District B reports being dependent upon teacher leaders to provide that information to teachers. Both districts reported that they meet regularly as a staff to discuss instruction of the curriculum to ensure that the instruction is delivered consistently, and as intended.

For measuring the fidelity of the decision-making process, Keller-Margulis (2012) suggested that RTI teams consider whether teams review universal screening data; whether universal screening data is used to identify students who might require additional support and intervention; and, if there are procedures in place for determining how universal screening data is used to identify which students receive additional support. The results of this study suggested that both school districts met to review the results of universal screening, and both districts used procedures and specified criteria to identify which children would receive additional support through RTI.

Parental Collaboration

Best practices for parent collaboration include that parents are given general information about RTI supports and how student progress is measured; parents are informed when a student is referred to Tier 2 and/or Tier 3 and are invited, but not required, to participate in the decision-making process; and finally, parents are provided with information about their rights as parents in accordance with federal and state special education regulations. Byrd wrote that involving parents in the RTI process is important because RTI can be confusing, and parents can feel left out because they don't understand the jargon that educators use; because RTI could lead to a referral for special education; and because research has shown that when schools involve parents, the outcomes for both students and parents are positive (Byrd, 2011).

A review of existing documents and results of interviews suggest that both District A and District B have a process in which they do what is minimally required, and communicate with parents of students identified for RTI, but parents have not been directly involved in the RTI planning, implementation, or decision-making process.

CHAPTER 6: ANALYSIS, CONCLUSIONS AND RECOMMENDATIONS

The purpose of this study was to examine the development and implementation of RTI in relation to best practices identified in research. This research attended to school-level implementation of RTI in relation to state and district policies, instructional and intervention strategies, and examined the alignment of those practices to the best practices identified in the literature.

This chapter discusses the findings of this study. The first section addresses key findings in regard to the policies, instruction, assessment, and intervention practices used by selected Maine schools in the development and implementation of response to intervention. The second section addresses the key findings in the alignment of identified practices to the best practices outlined in the Austin Framework of Best Practices for Developing and Supporting RTI. And the third section is a discussion of the interview responses from teachers and administrators in regards to their impressions about the development and implementation of RTI, and the impact that RTI has had on instructional practices in their respective districts.

Policies, Instruction, Assessment and Intervention

This section addresses the research question: “What are the policies, instruction, assessment, and intervention practices used by selected Maine schools in the development and implementation of response to intervention?”

Policy

Following the adoption of NCLB and the 2004 re-authorization of IDEA, the state of Maine adopted new special education regulations that required the use of RTI in all public schools, and later created a new law requiring that all districts provide instructional supports to assist students in meeting graduation requirements. With those changes, RTI became a focal

point in Maine schools for addressing the specific needs of students failing to meet the standards of the Maine Learning Results. The adoption of regulations requiring the use of RTI was well grounded and supported by research. But the state of Maine went beyond the required provisions of IDEA 2004, and adopted regulations that mandated all public schools to develop and implement a comprehensive kindergarten through grade 12 RTI program by the beginning of the 2010-2011 school year. And, while the state adopted policy requiring all districts to develop and implement RTI, the Maine Department of Education provided little assistance to the districts for writing and adopting policy. As a result, districts adopted policy that did not specifically address the best practices for developing and implementing RTI.

Although the state provided an outline of the components districts were required to include in their RTI programs, Maine's RTI guidance failed to provide substantial detail beyond the most basic and widely accepted characteristics of RTI programs, and no funding was provided to school districts that would have supported development and implementation.

Teachers and administrators from both districts reported that their respective districts had adopted policies pertaining to the development and implementation of RTI. School boards in both districts adopted Policy IHBAA: Referral and Use of General Education Interventions. Although the policy does not directly mention RTI, it does state, in part, that the "Superintendent of Schools, in consultation with the Director of Instructional Support/Special Services, may develop procedures for referral and the use of general education interventions." In addition to Policy IBHAA, the school board of District A also adopted administrative procedures for implementing IHBAA, which spell out the use of RTI in more specific terms: "Children at risk receive responsive interventions in the general education program that attempt to resolve the presenting problems of concern."

While the results of the study show that both districts had adopted at least foundational policies necessary to support RTI, only one district had taken steps to provide more prescriptive detail about the use of RTI as an intervention strategy to address the needs of children struggling to meet academic standards. Policy is a key element in supporting the development and implementation of a successful RTI program, and the importance of such support should not be under-estimated. Policy is designed to identify the priorities of a district, and the implementation of policy directs district operations. The adoption of policy also dictates how the priorities of a district will be supported. As policy is often considered the rules that a district will follow, having policy that is designed to specifically support the development and implementation of RTI is critical for the success of an RTI program. As it is a main function of a district superintendent to ensure that policies are implemented and followed, if RTI is in policy guidelines, it is much more likely to be implemented as an important practice.

Instruction

Study participants in District A reported that for elementary reading instruction, they use guided reading and leveled literacy components for the basis of direct instruction, a program developed by Dr. Irene Fountas and Dr. Gay Su Pinnell. Participants from District B reported that the elementary reading curriculum is a combination of the Wilson Foundations program for grades K-3. For grades 4 and 5, District B reported using a Balanced Literacy program, which is a “literacy program that strikes a balance between whole language and phonics”. District B participants reported that they emphasize instructional practices through support from the Teachers College Reading and Writing Project founded and directed by Professor Lucy Calkins. Participants from both districts reported the use of Everyday Math for elementary math

instruction. However, District B is in the process of changing its math curriculum, and will use enVision Math in the future.

While it is true that both districts had adopted new reading and math curricula that they reported as supporting RTI, the chosen curricula did not meet the standards to be evidenced-based, as defined in the No Child Left Behind Act of 2001. One district reported the use of Leveled Literacy Intervention (LLI) as the foundation for their reading curriculum at the elementary level. However, LLI is intended to be used as an intervention with small groups of children. Although research shows that LLI is effective in addressing struggling readers, particularly in grades K-2, it has not been proven to be an evidenced-based curriculum (Ransford-Kaldon, 2010). District B utilized the Teachers College for Reading and Writing Project (TCRWP) as the foundation to its reading program for elementary children. Although the TCRWP provides a model for literacy units, it has not been proven to be an evidenced-based curriculum. For their math curricula, both districts reported that they had utilized Everyday Math as their primary math curriculum. That program has been widely studied, but there is little evidence to conclude it is an effective evidenced-based curriculum for all elementary grade students.

Assessment

The results of this study suggested that both school districts had adopted universal screening programs for RTI. However, only one district screened all students three times per year, while the second district universally screened all students twice a year, while screening only those that were already involved in RTI, or those thought to be struggling in the curriculum, a third time. Best practices suggest that all students be screened at least three times annually to ensure that every student is progressing in the adopted curriculum. Both districts ensured that

universal screening instruments were appropriate, and that data from screening were used to make decisions regarding which students would receive RTI support. The instruments utilized by each district for universal screening were different, with one district using several instruments to assess literacy, and using both commercial and “homemade” tools to assess math. The other district utilized AIMSweb for screening students for both reading and math. For identifying students for RTI, one district reported that it targeted children who scored below the 40th percentile on the screening instruments, and had similar performance on other assessments. The other district established grade-level benchmarks to identify students in need of RTI interventions.

There are many universal screening tools available that can provide districts with valuable information about how individual students are progressing through their curricula. Although the instrument chosen is important, perhaps equally important is that district screening-programs need to include methods for reviewing the data and making decisions about intervention. In this study, both districts had developed screening and data review protocols that clearly identified those students who were not responding as expected to classroom-based intervention. That became their basis for determining which student’s required RTI services.

Intervention. The results of this study indicated that both districts described Tier 1 as classroom-based, for all children, and being the responsibility of the classroom teacher. Tier 1 was recognized in both districts as the delivery of curriculum, with embedded assessment and differentiation when needed. An important key to the implementation of RTI is ensuring that classroom teachers effectively deliver a curriculum that is evidenced-based and measurable. When students are struggling to meet academic standards, their teachers need to know: how to access building-level supports and possible intervention strategies; how to assess student

progress in intervention; how to determine which students are not responding to the interventions as expected; and how long to implement interventions before determining that the student might require more support. Thus, Tier 1 instruction is the key ingredient for ensuring that all children receive the same, evidenced-based curriculum instruction. Only those students not responding to Tier 1 are nominated for more intensive Tier 2 interventions.

Tier 2 intervention is provided in addition to the Tier 1 instruction that all students receive. Results of this study indicated that for reading intervention, District A uses Leveled Literacy, the Great Leaps Reading program, the Wilson Reading System, Read Live, and Lexia. Those interventions were typically being delivered three days a week, in half-hour sessions. District B described its interventions as a “double dose” of instruction using Leveled Literacy, Rasinski fluency interventions, and two Lindamood-Bell programs, Lindamood-Bell Phoneme Sequencing and Verbalizing and Visualizing. In addition to the Tier 1 core program, Tier 2 interventions were delivered in and out of class, dependent upon the class and the needs of students. Interventions were generally provided to small groups of students, three or four times weekly, but the frequency and duration of intervention was dependent upon staff availability and scheduling.

For Tier 2 math intervention, District A provides intervention based on materials developed by Professor Mahesh Sharma, director of the Center for Teaching / Learning of Mathematics in Framingham, Massachusetts, and the developer of Mathematics for All (Sharma, 2011). For District B, the focus of RTI was reportedly on literacy/reading and not math, and was dependent upon teacher capacity and time. For the intervention that is provided, District B participants reported that they provide students with a double-dose of classroom instruction, with support materials from the Everyday Math program.

The results of this study suggested that while both participating districts devoted time and energy to the development and implementation of Tier 2 interventions, only one district consistently delivered intervention to students in both reading and math. Additionally, neither district was able to deliver regularly scheduled interventions due to the identified barriers of time and staff capacity.

The results of this study found that neither district had a clearly articulated process for identifying students for RTI Tier 3 intervention. Additionally, while the districts said that the intervention strategies in Tier 3 were the same as they used for Tier 2, they were not able to identify a specific strategy for changes in the frequency or duration of intervention. And both districts identified that Tier 3 interventions were heavily dependent upon staff schedule and capacity. Thus, it was difficult to identify any real difference between Tier 2 and Tier 3 interventions.

Tier 3 intervention is an important component of a successful RTI program because it helps schools identify which children are not progressing in a curriculum, even after substantial intervention. That is important because Maine's Unified Special Education Regulations, Chapter 101, require that RTI data be included in the identification process of specific learning disabilities for special education. Thus, as districts develop and implement their RTI programs, they need to ensure that their Tier 3 program clearly articulates the criteria for identifying children in need of services, the interventions to be delivered, and the frequency and duration of interventions.

In reviewing the results of this study, it is important to note how critical it is that school districts make RTI a priority, and dedicate the resources necessary for its success. Districts need to ensure that all students are provided high-quality, evidenced-based curriculum in Tier 1, and

that students who do not respond to Tier 1 instruction receive reading and math interventions in more intensive Tier 2 and Tier 3 at regularly scheduled intervals. For any district to be responsive to the needs of its students, it must be dedicated to the provision of resources that support high-quality, and scheduled interventions.

Alignment of Identified Practices to the Austin Framework

The second section of this chapter addresses the research question “How do the identified practices align with best practices identified in research on the development and implementation of response to intervention?” A summary and analysis of the key findings in regard to the alignment of the identified practices with the best practices identified in research are further discussed in this section.

Consensus Building

The first overarching component of the Austin Framework of Best Practices is consensus building for supporting RTI. In the Austin Framework, consensus-building indicators are found in four categories: sharing information, school structures; planning; and professional development.

Sharing Information. Both districts in this study adopted policy IHBA: Referral and Use of General Education Interventions. District A also had created a long-range plan (Vision 2020) that supports teaching and learning in the district. However, while Vision 2020 includes a plan for community engagement and communication, the plan does not include a strategy for communicating information about RTI to the community. At the time of this study, District B had not created a vision specifically addressing student intervention. District B does have, however, a district vision outline in Policy AD: Educational Philosophy and Mission. In that policy, the school board states: “we believe that all schools must secure the involvement of the

community, students, staff, parents, and citizens. We strongly believe that our school system's success depends on good rapport and cooperation with our communities and its institutions."

If RTI is considered a priority for providing intervention to students who are struggling to meet academic standards, then sharing relevant information with school personnel, students, parents, and the community is vital to its success. RTI requires dedication and attention for identifying students; supporting students through evidence-based interventions; measuring student progress; and ensuring a process for increasing intensity and duration in response to student progress. To ensure that schools and districts have the support necessary to implement all of those components, it is important that schools share information with members of the school community, parents, and members of the community at large. That would be a district's vision for RTI; why it is important to meet the needs of all learners; and how the district will try to improve student outcomes by developing and implementing a high-quality RTI program.

School Structures. Results of this study show that District A has procedures designed specifically to support the RTI work in the district. But, while those were articulated by study participants, a written action plan does not exist. District A, however, did develop a Child Study Team brochure that outlined the process by which the school assesses, identifies, and intervenes with children who fail to meet the identified benchmarks of the curriculum and assessments. Respondents in District B reported that a written action plan for RTI was completed in 2008, but that it was out of date, and no longer being followed. Nonetheless, district leaders and teachers all reported that they meet regularly to discuss their RTI process across the district.

Neither district in this study had a written plan or protocol for how decisions about RTI are made. However, respondents from each district were able to describe the administrative support structure of RTI, and how decisions are generally made. In District A, respondents

consistently reported that a central office administrator was responsible for the oversight of RTI, as well as the use of a validation process in the school setting. District B respondents knew that a central office administrator had oversight of RTI. Additionally, participants noted that at the building level, an administrator is the overseer of implementation. Although not spelled out as clearly as the validation process in District A, respondents in District B consistently reported that teams of teachers review data regularly, and make decisions regarding RTI Services.

A review of documents and results of participant interviews revealed that both districts in this study had reviewed and modified their instructional practices to implement RTI. Nonetheless, the adopted Tier 1 core instruction and certain Tier 2 and 3 supports were not evidence-based. It appears both districts could benefit from guidance concerning how to identify and select truly evidence-based instructional methods.

Given that the results of this study show that both districts had perhaps adopted an unwritten protocol and procedures for implementing and supporting RTI, it is important to note that the lack of written guidelines led to inconsistencies in the delivery of their RTI programs. More specifically, there were inconsistencies found in the delivery of Tier 2 and 3 interventions, with one district providing mainly reading interventions, and both districts having difficulty delivering interventions at regularly scheduled intervals, due to time and staff limitations. Thus, to support a consistent and effective RTI program, districts need to ensure that protocol and procedures are clearly written and understood in order for their RTI program to have the best chance at realizing expected outcomes.

Planning and Professional Development. The results of this study show that neither District A nor District B had a written RTI action plan that included a specific plan for professional development. However, teachers and administrators from both districts

acknowledged consistent and ongoing professional development linked to the development and implementation of RTI in their respective districts.

To support the implementation of an RTI program, it is important for districts to ensure that their teachers and administrators have the knowledge necessary to support the program. The results of this study suggest that while both school districts had supported their programs with substantial professional development, the participating teachers and administrators still needed more information about things such as selecting evidence-based practices, Tier 1 intervention strategies, and implementing Tier 3 interventions. In that regard, a written action plan that identifies the needs of teachers and administrators and how those needs can be met would likely go far in supporting a district RTI program.

Components of RTI

The second overarching component of the Austin Framework of Best Practices is components of RTI. The indicators for the components of RTI are found in seven different categories: high-quality instruction, universal screening, Tier 1 intervention, Tier 2 intervention, Tier 3 intervention, measuring fidelity, and parental collaboration.

High-Quality Instruction

Study participants in District A reported that for elementary reading instruction, they use guided reading and leveled literacy components for the basis of direct instruction. District B reported that the elementary reading curriculum is a combination of the Wilson Foundations program for grades K-3, and a Balanced Literacy program for grades 4 and 5. Results of this study suggested that both districts in this study have adopted the Everyday Math Curriculum at the elementary level. However, although District B is currently using Everyday Math, respondents reported that for the coming year, the district would be switching to enVisionMath.

It appears that the districts believed those programs to be evidence-based, that was not uniformly true. Of those programs, only Everyday Math had been reviewed as partially effective by the What Works Clearinghouse.

Arguably, one of the most important keys to developing and supporting a successful RTI program is ensuring that the district offers high-quality, evidenced-based curricula to its students. In this regard, both districts recognized that research evidence for adopted programs is important, yet not all selected programs had sufficient evidence. While high quality curricula and instruction are the foundation of an effective RTI program, it is equally important to ensure that teachers have a thorough understanding of how to regularly assess student progress to ensure that all children are responding to the curriculum as expected.

Universal Screening

All elementary students in District A participate in universal screening for reading and math in the fall, and again in the spring. In addition, students who are struggling or have qualified for RTI in the fall, are screened three times per year, with one screening added during the winter months. To assess reading, District A utilizes the Phonological Awareness Literacy Screening (PALS) and the Benchmark Assessment System (BAS). For math, they reportedly use homemade assessment and the Northwest Evaluation Association Measure of Academic Progress (NWEA, MAP). In District B, all students are assessed three times per year (fall, winter, and spring). AIMSweb is used in District B to universally screen both reading and math.

District A uses universal screening and a “validation process” to determine which students are not meeting the benchmarks set by the district, which are scores below the 40th percentile. District B reviews the normed target scores of AIMSweb, which are then discussed by teams of teachers and administrators to determine RTI identification, and any supports necessary

for individual students. Although both districts clearly understand that universal screening is an essential part of RTI practices, they did not adhere to all recommended components of such screening. As with interventions, screening measures need to meet certain research standards. While AIMSweb, used by District B, possesses the necessary characteristics for screening, not all of the measures used by District A did.

The results of this study suggest that both districts had established what they believed to be the most effective method for universally screening all of their children in reading and math. While only one district screened all children three times per year, the other district screened all children two times per year. Children who were receiving RTI services, and those who were not receiving RTI, but identified as struggling in the curriculum, were screened a third time during the winter.

In both districts, Tier 1 intervention is for all children, is the responsibility of the classroom teachers, and was mainly described as the delivery of the adopted curriculum with differentiated instruction. Neither district had any written criteria for identification, intervention strategies, or time limits associated with Tier 1 instruction.

As discussed in the previous section, the importance of Tier 1 support and intervention cannot be overstated. The results of this study suggest that the bulk of staff development and time was devoted to the development and implementation of Tier 2 process and procedure. However, to ensure appropriate support of their RTI programs, districts would do well to review their Tier 1 processes and procedures to be sure that students are receiving appropriate instruction and intervention in the classroom, and to ensure that only those students not responding to Tier 1 interventions are referred for more intensive Tier 2 services.

In District A, Tier 2 RTI identification is based upon student performance on the universal screening at or below the 40th percentile, followed by a validation process for determining if a student's score on the universal screening is an accurate reflection of true performance. Although a student could be identified for Tier 2 intervention, the results of this study suggest that in District A, there was little consistency in the delivery of Tier 2 interventions, which are heavily dependent upon schedules, available staff, and student need. The typical frequency for Tier 2 reading interventions in District A is three days per week for half an hour each session. For Tier 2 math intervention, the frequency of intervention ranges from two to three times a week for 30 to 45 minutes per session. Once again, intervention is heavily dependent upon schedules, available staff, and student need.

In District B, Tier 2 intervention was most commonly described as "double dosing." Leveled Literacy is most commonly used for reading intervention. However, District B also utilizes Rasinski fluency interventions, and the Lindamood Bell programs LIPS and Visualizing and Verbalizing. Tier 2 interventions are reportedly delivered three or four times per week, but time is dependent upon schedules and capacity.

As discussed above, both districts had devoted time and energy to the development and implementation of Tier 2 intervention services. Barriers to providing Tier 2 interventions were identified in both districts and included limitations in staff schedules and capacity that impacted the frequency and duration of interventions provided. Thus, it appears that using appropriate Tier 1 instruction is very important in these districts' efforts because additional instruction at Tiers 2 and 3 is difficult to schedule, and much less common.

In both Districts A and B, there were no specific interventions identified solely for students in need of Tier 3 reading or math interventions beyond those tools identified for Tier 2.

The processes for identification, frequency, and duration of reading or math interventions were not clearly defined at the time of this study, but a general understanding in both districts is that Tier 3 interventions involve greater intensity and duration. Tier 3 interventions are vitally important to identify those children who are not responding to intervention, despite substantial and significant interventions provided. As children progress through the tiers of intervention, those data can be used to support potential referral and identification for necessary special-education support services.

Measuring Fidelity

The results of this study suggest that District A is attempting to ensure that interventions are delivered with fidelity. Teachers, teacher leaders, and administration reported multiple methods for ensuring the fidelity of interventions in their district. In District B, teachers, teacher leaders, and administration are also attempting to monitor the fidelity of their interventions, but report that they are finding it difficult to do so.

As districts progress with the development and implementation of RTI, it is important to attend to the fidelity of instruction, assessment, and intervention. That is, the curriculum needs to be delivered as intended; students must be assessed regularly to ensure that they are responding as expected to the curriculum; and interventions are provided to students as needed, delivered as intended, and student response is measured and analyzed. Without attending to fidelity, it will be difficult to measure the overall effectiveness of a district's RTI program in meeting the needs of students.

Parent Collaboration

A review of existing documents and results of interviews suggest that both District A and District B have a process by which they communicate with parents of students identified for RTI,

but parents have not been directly involved in the RTI planning, implementation, or decision-making process.

Parents are an integral part of students' lives and their awareness of school supports, such as RTI programs, can make a difference in students' outcomes. To the extent possible, parents should be fully informed of all phases of RTI supports, and how schools support students not making the progress expected in the curriculum. Although not required by law, districts are encouraged to involve parents in the RTI process as partners in supporting their sons and daughters. That would not only help parents feel like they are a part of their child's education, but also help the district gain support for RTI resources in the community. Even if parents cannot be intimately involved in the decision-making process, they should be fully informed of the process and procedures of the RTI program.

Conclusion

Maine went beyond the required provisions of IDEA 2004, and adopted regulations that mandated all public schools develop and implement a comprehensive kindergarten through grade 12 RTI program by the beginning of the 2010-2011 school year. In support and preparation for statewide implementation of RTI, the Maine Department of Education published an RTI guide, which was provided to assist school districts with the development and implementation of their RTI frameworks and programs. In Chapters 1 and 2 of this study, the case is made that Maine's RTI guide failed to provide substantial detail beyond the most basic and widely accepted characteristics of RTI programs, and as a result, there is a wide variation of programs across the state. Although the Maine Department of Education provided a companion website that provided practical information about the development and implementation of RTI, the published guide fell short in (a) identifying specific interventions, (b) providing detailed information on data

collection, (c) providing details about what data should be used to make instructional decisions, and (d) including specific guidance on assessing the fidelity of instruction, an important component in high-quality intervention programs.

The goal of this research was to examine the development and implementation of RTI in relation to best practices identified in research, attending to school-level development and implementation of policy, instruction, assessment, and intervention in two Maine school districts. The questions of this research study focused on an examination of school policies, instruction, assessment, and intervention practices, and further examined how the identified policies, instruction, assessment and intervention practices were aligned with the best practices found in research. To achieve the goal of this study, a qualitative methodology was chosen, as qualitative research helps the researcher understand and interpret how participants perceive a specific event; what people really think about the event; and how they make sense of it (Merriam, 2009). That methodology was the best choice because it allowed the researcher to understand how RTI was developed and implemented from the perspective of those most closely related to the work.

Although this study's findings are based upon a limited number of interviews with teachers, teacher leaders, and administrators within two districts in the southern and central regions of Maine, this qualitative study did produce a clear understanding of how RTI was developed and implemented in two different districts/schools. That information can be used by other districts, regardless of location, to either develop or improve upon their own RTI programs.

The findings from this study suggest that there are considerable differences and gaps in best practices in the RTI programs developed by two Maine school districts. In order to comply with the state-mandated implementation of RTI in grades K-12, the districts were left to their own devices and human resources to develop and implement RTI. Although the districts were

provided with the state's guide to RTI in 2009, the guide served only as a basic outline for developing an RTI program based upon best practices. Had the state provided more support and guidance to school districts, the burden on school personnel could have been minimized, and the resulting RTI programs could have been more consistent with best practices.

There was little professional development to increase district capacity in the work. Thus, teachers, teacher leaders, and administrators describe the development and implementation process as coming from leadership in a top-down model, with little input from teaching personnel. Best practices indicate the importance of building consensus through the sharing of information, developing a common vision, and developing an action plan for development and implementation. Results of this study suggest that although the school boards of both districts adopted policy to comply with the RTI mandate, neither district developed a common vision. In order for a district to develop a common vision, the district needs to identify stakeholders. The stakeholders would include Board and community members, administrators, teachers, parents, and students. Once the stakeholders have been identified, the district needs to ensure that the stakeholders understand the purpose and intent of RTI, and that they have a voice in developing the vision for how RTI is to be carried out in the school setting.

Neither district was able to build momentum for RTI through information shared with teachers, parents and the community. As a result, both districts reported a lack of community understanding, both in and outside of school. In order to best gain RTI support and understanding, information about RTI must be shared with teachers, parents, and community members. For this, districts might wish to consider developing a formal communication plan that identifies what information needs to be shared, who will share the information, and when the information will be shared.

Although one district had developed an action plan for RTI, teachers, teacher leaders, and administration admitted that it was no longer being followed, which has resulted in inconsistent services being offered to children, and services that are based upon which school they attend, staff capacity, or class schedules. Even though the other district did not have a written action plan, school personnel reportedly understood the process, but stated that they experienced at least some level of confusion with teaching roles and/or responsibilities. Without a clear plan for development and implementation, neither district developed formal indicators to measure progress toward established goals, which would have been essential for promoting a consistent process for implementing RTI.

In addition to the sharing of information and building support for RTI, best practices for building consensus also includes building a plan for the ongoing professional development of school personnel. In that regard, although a formal professional development plan was not created in either district, both districts have supported a substantial number of hours dedicated to professional development towards the implementation of RTI. The focus of the professional development was reportedly on instructional practice, assessment, and analyzing student performance and assessment data. That has reportedly led to improved teacher collaboration, practices, and intervention services for both districts.

One of the tenets of RTI is the implementation of high-quality instruction. In that regard, best practices suggest that schools adopt evidence-based reading and math curricula. Findings in this study suggest that the districts reviewed curriculum options and adopted programs they believed to be evidence-based. Nonetheless, the majority of the adopted programs do not meet federal guidelines for evidence-based practices. For the selection of evidence-based practices/programs, districts will need to support teacher and administrator efforts in determining

the needs of students, while developing a process for researching, reviewing, and analyzing programs for meeting those needs,

Study findings suggest that both districts in this study had strong universal screening and data review components in place for the implementation of RTI. Although the RTI guide provided by the state had fallen short by not providing detailed information on data collection, or providing details about what data should be used to make instructional decisions, both districts managed to develop and implement a well-supported data collection and review process. Teachers reported that as a result of that process, they were better able to identify how their students were doing in the curriculum. Moreover, teachers were reportedly working more collaboratively to improve their own teaching practices, as they compared their own student performance to the performance of students from other classrooms. Although best practices suggest that all students be universally screened three times per year for reading and math, results indicated that only one of the districts screened all of their students three times per year, while the second district screened all students two times per year. (Students in the latter district who had been previously identified for RTI or were considered to be struggling in the curriculum, were screened three times per year) In regard to identification, both districts used a formal process for identifying children qualified for RTI services. When compared to each other, the practices in each district were quite different. One district decided that any child who scored below the 40th percentile on a screening assessment would be considered for RTI, while the other district used a lower percentile score based upon the recommendations of the test manufacturer to indicate a child was not meeting standards. To ensure that all children receive the appropriate instruction and support in the curriculum, the best practices for universal screening includes assessing all children three times per year. Universal screening will help districts determine

which students are progressing as expected, and to identify those students that potentially need RTI support.

While classroom-based instructional practices were generally supported by professional development in both districts, findings of this study suggest a general lack of understanding and support for Tier 1 in the classroom. Even though teachers were able to describe Tier 1 as differentiated instruction for children who needed just a little bit of extra help, teachers were not provided with specific instructional strategies or curriculum-based measures that would have supported stronger Tier 1 efforts. As Tier 1 is for all students, teachers need to understand that the best practices of Tier 1 is the delivery of an evidence-based curricula with fidelity. This is critical as Tier 1 is the foundation of all RTI programs. Although Tier 1 interventions were not well developed in either district, the strength of the RTI programs in both districts was found in their Tier 2 offerings. Both districts had developed methods for collecting and reviewing data on student performance that aided in the identification of children in need of Tier 2 RTI intervention services. Both districts used evidenced-based interventions in both reading and math, and generally, students were provided services in small groups several times per week. Results of this study suggest that the selected districts placed their greatest efforts in the provision of Tier 2 services to children. However, findings also indicated that Tier 3 interventions were generally not well developed, implemented, or supported by either district. For Tier 3, best practices call for research-based interventions, with increasing intensity and frequency that is based on student response to intervention. To ensure that Tier 3 is successful, district leaders need to ensure that intervention tools are appropriate and available, that these interventions are delivered with fidelity, and that there is adequate staffing to deliver interventions.

A review of the RTI programs in the districts indicated that both dedicated more attention to assessment than they did to the selection of evidence-based curricula, and/or interventions. One explanation might be that assessments were more readily available, less expensive, and easier to implement, as compared to selecting and implementing new curricula, or developing interventions. Regardless of the reason, the end result for the two districts in this study is that while both have relatively strong assessment components, neither district had implemented a high-quality Tier 1 component with evidence-based curriculum. Additionally, the interventions developed were inconsistently delivered for both reading and math, as both districts said that their intervention efforts were hindered by time and availability of staff. Although it is important to recognize the work that each district dedicated to developing and implementing RTI as directed, the lack of an evidence-based curricula along with the inconsistencies in their intervention protocols is likely to produce less than expected outcomes for meeting the needs of struggling learners.

Despite the absence of evidence-based curricula, consistent interventions, or guidance and resources from the state, the response from teachers, teacher leaders, and administrators was found to be generally positive in this study. There is recognition that there is much work to be done, but there is also a willingness to do it. Teachers enjoy the chance to collaborate with one another, and to work closely with their colleagues in an effort to improve student performance. Teacher leaders and administrators appreciate the new focus on teaching strategies. Although there was some initial resistance from school personnel not directly involved in the development and implementation of RTI, the interventions are reportedly perceived to be accepted by most. And, regardless of how well the program developed in each district aligns to best practices, or

the fact that the scores in one district have not improved, the overall response of those interviewed is a belief that RTI has improved student learning.

Limitations of the Study

This research study has a number of limitations. The Austin Framework used in this research was constructed by the researcher solely for use in this study. It is based upon the researcher's review of existing literature pertaining to the development and implementation of RTI. The research is also limited to the review of existing documents, personal interviews, and to the perceptions of participants from two schools in Maine during one school year (2014-2015). Although there will be some variation in the dates when participating districts implemented RTI, data were collected only from districts that achieved implementation of RTI in grades kindergarten through five on or before the beginning of the 2012-2013 school year. Another limitation of this study is that it focuses on a small number of teachers, teacher leaders, and administrators. The results, therefore, cannot be generalized to other teachers and settings.

Recommendations

This study suggests the following implications for policy and practice in the development and implementation of Response to Intervention at the school and district level.

- If the goal of RTI is to ensure that schools and school districts are meeting the needs of all children by assessing student progress and providing interventions to help children meet school and/or state standards, then the intent and process of RTI must be clearly articulated by policymakers. That is, policymakers must clearly articulate the importance of need for RTI, and the state department of education needs to provide the support necessary to help schools develop and implement an RTI program that will meet the needs of children. Districts must work to ensure that their practices are aligned to the best

practices identified in research to ensure that they can achieve optimum student outcomes.

- Districts need more information on how to gain and maintain community support for RTI. That is particularly important, and is related to the foundations of developing policy and supports for the development and implementation of RTI. Along with policy and support, districts need to develop communication plans for sharing information with stakeholders outside the education community, including students, parents, and community members not necessarily involved in the operations of the district.
- Schools/districts need to know what assessment instruments are most effective for universal screening, and for routinely measuring student progress, and schools/districts need to better understand how to use their universal screening data to identify which students are in need of RTI, and progress monitoring to make instructional decisions. Providing such information would result in better consistency across schools and districts.
- It is important that districts understand how to best develop and implement the three tiers of intervention, including how to select evidence-based curricula. They need to know which programs to use for intervention, how to provide intervention with fidelity, and how to measure progress. Providing that information would be beneficial for ensuring that each district: fully understands each tier of the intervention process; has the appropriate intervention tools; knows how each intervention is delivered; and knows how to measure progress. Ultimately, that would lead to better consistency across the state, and would allow for better evaluation of the effectiveness of the RTI initiative.

Potential Future Research

Findings in this study suggests that future study of RTI may be warranted. One such study might be related to the costs associated with implementing a high-quality RTI program. A potential research question might be: What are the financial costs for implementing an RTI program based upon best practices? The results of this research could be very useful to policy makers in regards to financially supporting RTI initiatives. Another consideration for future study could be a quantitative research study for gaining broad knowledge of teacher understandings in relation to the best practices of RTI. A potential research question might be: To what extent do teachers understand the best practices of the three tiers of RTI? Results of this study could be used by state departments of education, regional, or local school districts to define specific needs for professional development related to the provision of RTI in public schools. Finally, a third consideration for future research is an in-depth qualitative study on how teachers have been trained to support and deliver a Tier 1 evidence-based curriculum. A potential research question could be: To what extent are public school teachers, in their first 3 years of service, prepared to deliver high-quality, Tier 1 classroom-based services to children? Results of this study could be used by institutions of higher learning to better prepare teachers for service in the field.

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APPENDIX A: DESCRIPTION OF RESEARCH STUDY

Project Title: An Examination of RTI Development and Implementation Relative to Best Practices.

Principal Researcher(s): *Paul Austin, The University of Southern Maine, (207) 751-8095, paul.austin@maine.edu.*

Purpose

The purpose of this study is to examine the development and implementation of RTI in relation to best practices identified in research. This research will attend to school level implementation that includes policy, instructional and intervention strategies, and administrator and teacher perceptions pertaining to the effectiveness of RTI. This research will be conducted in school districts that have successfully implemented an RTI program. To meet this purpose, the researcher will a) develop an understanding of existing district policies and RTI frameworks that were created in order to comply with state law and the implementation of RTI, b) examine the instructional and intervention practices used by teachers in the RTI framework, and, c) explore the administrator and teacher perceptions about instructional changes and the effectiveness of RTI towards improved student outcomes. A framework of the best practices for developing and implementing RTI will be developed and used to better understand the extent to which RTI development, implementation, and practices align with the best practices identified in the literature. This research will provide information that can be embraced by schools in the development and implementation of RTI, or to improve upon their current RTI program.

Research Plan

The inquiry into the development and implementation of RTI Maine schools will involve a 3-part interview process with select administrators and teachers working in districts that have fully implemented RTI programs. Interviews will be transcribed and analyzed for themes and patterns. These themes and patterns will be compared with existing documents to ensure accuracy.

Interviews

Individual interviews will be limited to 45-60 minutes in duration, held in a mutually agreed upon place, and occur at a mutually agreed upon time. This will provide the best opportunity to ensure the comfort of the participant and to avoid disruption in the educational setting. The setting and time will be set initially by phone conversation and confirmed by email in advance. A follow-up email will be sent prior to each interview session. Each interview will be audiotaped and transcribed verbatim by this researcher. Transcripts will be coded and reviewed prior to the ensuing interview to determine additional questions or areas for exploration with the participant.

Report of Findings

All data collected will be aggregated and incorporated into a summary report of the findings. **All data and reporting will seek to insure the privacy and confidentiality of the participants.** At the completion of the interviews, the researcher will prepare a final dissertation report with findings that will benefit others interested in implementing or improving the development and implementation of RTI in Maine and across the nation.

Expectations

Participants for this study agree to:

- Indicate an interest in participating in this 3-part interview process.
- Participate in all three interviews.
- Reflect openly about their background and connection to RTI, practice and procedures, and discuss the impact that RTI has had on the instructional process and for improving student outcomes.
- Provide access to relevant public documents, and
- Provide feedback as to the accuracy of patterns and themes that emerge in the collected data.

Further Information

If additional information is needed, participants are asked to contact

Paul Austin:

(207) 751-8095

paul.austin@maine.edu

APPENDIX B: INFORMED CONSENT FORM UNIVERSITY OF SOUTHERN MAINE

CONSENT FOR PARTICIPATION IN RESEARCH

Project Title: An Examination of RTI Development and Implementation Relative to Best Practices.

Principal Researcher(s):

- *Paul Austin, The University of Southern Maine, paul.austin@maine.edu*
- *Faculty Advisor: Catherine Fallona, Ph.D. catherine.fallona@maine.edu*

Introduction:

- Please read this form.
- You also may request that the form is read to you.
- The purpose of this form is to provide you with information about this research study and, if you choose to participate, document your decision.
- You are encouraged to ask any questions that you may have about this study, now, during the activities, or after the project is complete.
- You can take as much time as you need to decide whether or not you want to participate.
- **Your participation is voluntary and you may ask questions at any time.**

Purpose of the Study:

- The purpose of this study is to examine the development and implementation of RTI practices in elementary schools in Maine.
- Participants in this study are school administrators and teachers.
- Participants have been recommended for the study by district administration.

What will you be asked to do?

If you choose to participate in this study, you will be asked to:

- Participate in 3 audio-recorded individual interviews lasting 45-60 minutes each.
- Interviews will be conducted at a mutually convenient time and place.
- Provide to the researcher any relevant artifacts and documents related to your RTI work at your school (student and staff names should be removed to protect confidentiality).
- Provide feedback on transcripts, themes, or ideas generated from your interviews.

What are the possible risks of taking part in this study?

- It is possible that sharing information about your RTI work could make you uncomfortable due to the specific practices used.

What are the possible benefits of taking part in this study?

- As a participant in this study, you will have the opportunity to engage in a confidential and professional discussion about the development and implementation of RTI at your school, and reflect upon your experiences and the benefits or limitations of RTI for students.

Confidentiality and Privacy of Data:

- The records of this study will be kept confidential to the extent allowed by law. Specifically:
 - From the start of the project, all participants will be given a pseudonym;
 - Audio recording files of each interview will be stored on local storage devices only, be password protected, and never transmitted over the internet;
 - Only the primary researcher and faculty supervisor will have access to the audio recordings;
 - All audio files will be destroyed upon completion of the project using industry standard erasure procedures;
 - In any sort of published report of the study outcomes, information will be de-identified so that it will be impossible to identify individual participants;
 - Please note that U.S. federal regulatory agencies and the USM Institutional Review Board may review the research records.
- A copy of your signed consent form will be maintained by the principal investigator for 3 years after the project is complete and then destroyed.
- The consent forms will be stored in a secure location that only the principal investigator and faculty supervisor can access.
- The participant consent forms will be stored separately from, and will not be affiliated with, any data obtained during the project.

Voluntary Participation / Withdrawal:

- Your participation is voluntary.
- Your decision to participate will have no impact on your current or future relations with your school, district, and the University.
- Your decision to participate will not impact your relationship with your employer.
- You may skip or refuse to answer any question for any reason.
- If you choose not to participate there is no penalty to you.
- You are free to withdraw from this research study at any time, for any reason.

Contacts and Questions:

- The researcher conducting this study is Paul Austin. For questions or more information concerning this research you may contact him at (207) 751-8095, or paul.austin@maine.edu.
- For additional information or questions, you may also contact Cathie Fallona, Program Advisor at catherine.fallona@maine.edu.
- If you choose to participate in this research study and believe you may have suffered a research related injury, please contact Paul Austin at (207) 751-8095.
- If you have any questions or concerns about your rights as a research subject, you should call the USM Human Protections Administrator at (207) 228-8434 and/or email usmirb@usm.maine.edu.

Will I receive a copy of this consent form?

- Yes, you will be given a copy of this consent form.
-

Participant's Statement

I understand the above description of this research and the risks and benefits associated with my participation as a research subject. I agree to take part in the research and do so voluntarily.

Participant's signature

Date

Printed name

Researcher's Statement

The participant named above had sufficient time to consider the information, had an opportunity to ask questions, and voluntarily agreed to be in this study.

Researcher's signature

Date

Printed name

**APPENDIX C: AUSTIN FRAMEWORK OF BEST PRACTICES FOR DEVELOPING
AND SUPPORTING RTI**

<u>Consensus Building</u>	<u>Best Practices Indicators</u>	<u>Examples of Data Sources</u>
1. Provide information about the rationale and procedures for RTI to internal and external stakeholders	<p>1.1. The school adopts a vision that supports effective interventions to meet the needs of all students.</p> <p>1.2. The school has a communication plan and utilizes personnel from a variety of departments to share information.</p> <p>1.3. The school shares the adopted visions with the school board, faculty, parents, students, and other members of the community.</p> <p>1.4. The school builds momentum for RTI by collaborating with the school board, parent groups, community organizations, faculty and students</p>	<p>1.1. Documents such as district policy, mission statements, and district communications, and interview data</p> <p>1.2. Documented plans, agendas and meeting minutes, presentation documents, and interview data.</p> <p>1.3. Meeting agendas and minutes, interview data.</p> <p>1.4. Meeting agendas and minutes that show how questions about RTI were answered, visible materials in the school, and interview data.</p>
2. School structures that support RTI	<p>2.1. The school has a written protocol that outlines the responsibilities of administrators, teachers, and support personnel for the development and implementation of RTI.</p> <p>2.2. The school has an identified procedure for how key decisions about RTI planning are made, and who is responsible for decisions.</p> <p>2.3. Administration and faculty evaluate current instructional practices and modify these as needed to prepare for implementation of RTI (i.e., district-level review of adopted curricula).</p>	<p>2.1. Written documents, district policy, interview data.</p> <p>2.2. Documentation of decisionmaking procedure and interview data.</p> <p>2.3. Meeting agendas and minutes, written documentation of modifications and interview data.</p>

	<p>2.4. Administration and faculty examine and jointly adopt indicators that will show the implementation of RTI, including teacher and staff evaluation systems.</p> <p>2.5. School personnel review costs associated with the implementation of RTI and budget accordingly to assure needed financial support for implementation of RTI.</p>	<p>2.4. District policy, faculty evaluation materials, and interview data.</p> <p>2.5. Meeting agendas and minutes, district budget documents, presentations, interview data.</p>
3. Building and supporting RTI	3. The school has a RTI action plan that is consulted regularly in order to guide implementation.	3. The written school RTI plan, with amendments and interview data.
4. RTI planning and Professional Development	4. The school RTI plan includes details for professional development that supports RTI Implementation.	4. Agendas and minutes from documented training sessions with faculty attendance, and interview data.

**APPENDIX D: AUSTIN FRAMEWORK OF BEST PRACTICE FOR
IMPLEMENTING RTI**

<u>Components of RTI</u>	<u>Best Practice Indicators</u>	<u>Examples of Data Sources</u>
1. High quality instruction and behavioral supports	1. The reading and math curricula are evidenced-based and the district has behavioral supports in place in the general education setting.	1. Written curricula, curricula materials, formal behavioral support plans, and interview data.
2. Universal Screening	<p>2.1. The school has an established screening program in order to reliably assess and predict those students in need of support through RTI. (Maine Requirement)</p> <p>2.2. The school has established procedures for screening all students in specified grades tri-annually, and follows screening protocols consistently.</p> <p>2.3. Screening instruments are brief and reliable, as demonstrated by external data.</p> <p>2.4. Tri-annual screening scores are reviewed to determine the effectiveness of instruction for all students and to plan interventions for selected students.</p>	<p>2.1. Written documentation of process of screening, including policy and/or procedures for reviewing data. Interview data.</p> <p>2.2. Written documents that include policy or procedures for screening and documentation of professional development or other training that ensures assessment fidelity. Interview data.</p> <p>2.3. A document listing the assessments used for screening and the schedule for which these assessments are delivered.</p> <p>2.4. Agendas and minutes from building level and/or grade-level data review meetings, Interview data.</p>
3. Tier 1	<p>3.1. Teachers are provided training and professional development to ensure that the adopted Tier 1 curricula are delivered with fidelity to ensure the integrity of instruction and intervention for all students.</p> <p>3.2. Classroom teachers use data from both tri-annual screenings</p>	<p>3.1. Documentation of professional development, faculty meeting agendas and minutes, and curriculum delivery standards are visible and available, written plans for frequent integrity checks, and interview data.</p> <p>3.2. Interview data and classroom assessment</p>

	<p>and curriculum-embedded assessments to determine which students are not meeting benchmarks and need additional support. For students identified, teachers group students with others of similar learning needs.</p> <p>3.3. Students who participate in additional support are assessed at least monthly with regular data review to determine progress in meeting benchmarks.</p> <p>3.4. For students who fail to meet benchmarks in a timely manner, the teacher refers the student for more intensive Tier 2 support.</p>	<p>documents, assessment schedules.</p> <p>3.3. Written documents using CBM, schedules of assessment, grouping assignments, and interview data.</p> <p>3.4. Written procedures for referral for more targeted intervention, meeting documents, teacher interview data.</p>
4. Tier 2 Intervention	<p>4.1. The school identifies personnel responsible for providing Tier 2 interventions, and provides training to ensure that interventions are delivered as intended with fidelity.</p> <p>4.2 Students are placed in groups of no more than 3 to 5 children with similar learning needs.</p> <p>4.3. Intervention is provided that is in addition to the Tier 1 core instruction (e.g., 90 or 60 minutes). The sessions are conducted in small groups at least three times per week for 30 minutes per session.</p> <p>4.4. Tier 2 interventions are assessed at least monthly to determine growth rate over time as compared to grade-level peers.</p> <p>4.5. If the student is not showing adequate progress within a timely manner as a result of Tier 2 intervention, the student is referred for Tier 3 support.</p>	<p>4.1. Written documentation of assigned personnel, training documentation, procedures for Tier 2 delivery, instructional materials, and interview data.</p> <p>4.2. Screening data summaries and Tier 2 instructional group lists.</p> <p>4.3. Intervention schedules and interview data.</p> <p>4.4. Written assessment protocol and procedures, assessment data, meeting documents, and interview data.</p> <p>4.5. Meeting agendas and minutes, referral documents, and interview data.</p>

5. Tier 3 Intervention	<p>5.1. Students who do not respond to Tier 2 intervention are provided with highly intensive interventions, delivered by trained personnel.</p> <p>5.2. Intervention is provided daily in either one-on-one or in very small groups that are no larger than one to three students. Tier 3 interventions are in addition to Tier 1 plus Tier 2 instruction.</p> <p>5.3. Student progress is measured at least weekly with a measure aligned to the intervention.</p> <p>5.4. Student data are reviewed at regular intervals of not more than every three weeks.</p> <p>5.5. Students whose data show a persistent lack of progress despite intervention are referred to special education in accordance with federal and state special education regulations.</p>	<p>5.1. . Written documentation of assigned personnel, training documentation, procedures for Tier 3 delivery, instructional materials, and interview data.</p> <p>5.2. Tier 3 intervention schedules, documentation of treatment sessions, and interview data.</p> <p>5.3. Progress monitoring schedules indicating assessments used, graphed data, and interview data.</p> <p>5.4. Data review agendas and minutes and interview data.</p> <p>5.5. Written protocol with data summary and procedures for special education referrals, district forms and referral documents, and interview data.</p>
6. Measuring Fidelity	6. The district directly and frequently assesses the fidelity of interventions through monthly checks to ensure that interventions are delivered strictly as intended.	6. Meeting documentation, agenda documents, observation documents, evaluation materials, and interview data.
7. Parent Collaboration	<p>7.1. All parents are given general information about RTI supports and how student progress is measured.</p> <p>7.2. Parents are informed when a student is referred to Tier 2 and/or</p>	<p>7.1. Documented protocol and procedures for informing all parents of student progress (e.g., annual parent letter), documentation of parent conferences, progress reports and/or quarterly report cards.</p> <p>7.2. District policy, procedures or protocol that informs parents</p>

	<p>Tier 3 and invited to participate in the decisionmaking process.</p> <p>7.3. Parents are provided with information about their rights as parents in accordance with federal and state special education regulations.</p>	<p>of available student assistance and invitation for participation.</p> <p>7.3. District policy and special education procedures, form letters, and documents referencing parental rights.</p>
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Appendix E: Semi-Structured Interview Protocol #1

Focus: Administrator and Teacher Demographics and Connection to RTI.

1) Demographic information:

- a. Years teaching / length in district
- b. Position held-grade taught-other assignment
- c. Responsibilities relating to RTI and/or other school initiatives.
- d. Professional development/training related to RTI that you have had
- e. Committee work related to RTI
- f. Experience with the development and implementation of RTI

2) Describe your teaching or administrative career.

- a. What drew you to education?
- b. What was your initial goal for teaching and has that changed over time?
- c. What are your specific areas of expertise and how did you develop those?
- d. What interests you most about education today?
- e. What are you most excited about in your field?
- f. What are you most concerned about?
- g. How do skills, interests, and concerns connect to RTI?

3) Please describe your training experiences.

- a. What type of training did you have pertaining to student intervention in the classroom?
- b. How did your teacher/administrator training prepare you for working with struggling students?

4) Responsibilities for RTI

- a. How long have you been involved in RTI?
- b. What are your specific responsibilities?
- c. How were you trained to do your duties for RTI?
- d. What time commitment is dedicated to your duties for RTI?
- e. What excites you most about RTI
- f. What are you most concerned about in RTI in your school?

APPENDIX F: SEMI-STRUCTURED INTERVIEW PROTOCOL #2

Focus: District/school development and implementation of RTI.

- 1) What does RTI mean to you?
- 2) Did your school or district develop an action plan for sharing information and building support for RTI? Please describe what the plan entailed
- 3) How was information about RTI shared? What information was shared, and who shared it?
- 4) What information was shared with school staff? How were they involved in the process of developing and implementing RTI?
- 5) What is the administrative structure of support for RTI? How is RTI supported in terms of administrative support (i.e., Central Office and School Board), and how is it supported financially?
- 6) Were policies written? If so, how were these constructed and who was involved in the process?
- 7) Did the school build consensus for the implementation of RTI? Describe that process.
- 8) What part has school staff played in the development and review of RTI policy, plans, and forms?
- 9) How has the community participated in this process?
- 10) Does your school have a written RTI implementation plan? Describe the process the school uses.
- 11) Describe universal screening
 - a. What instruments do you use?
 - b. How often are students assessed?
 - c. Who assesses students?
 - d. How do you determine who is assessed? Do you have specific guidelines for determining who is assessed?
 - e. How is data from universal screening reviewed and by whom?
 - f. Describe how universal screening data is used to inform instruction and/or make intervention decisions
- 12) Describe the Tier I practices associated with RTI that is used in your school.
 - a. Is the curriculum evidenced based? How was it selected?
 - b. What training or guidance do teachers receive to ensure that the curriculum is delivered as intended?
 - c. Are students assessed regularly to ensure progress in the curriculum
 - d. How are teachers trained in curriculum based measurements?

- e. How are children identified as needing Tier I interventions?
- f. How are Tier I interventions provided and assessed?
- g. Who reviews the data for Tier I interventions?
- h. Who determines instructional or intervention changes based upon the data?

13) Describe the Tier 2 practices associated with RTI that is used in your school.

- a. How are students identified for Tier 2 interventions?
- b. Who provides Tier 2 interventions?
- c. What is the Tier 2 Structure in your school?
 - i. How are children grouped (e.g., how many in the group and how are groups determined)
 - ii. How much intervention do they receive
 - iii. Where is intervention provided
- d. What specific tools does your school use to provide Tier 2 interventions?
- e. How do you assess the effectiveness of Tier 2 interventions and how often do you assess student progress in Tier 2 interventions?

14) Describe the Tier 3 practices associated with RTI that is used in your school.

- a. How are students identified for Tier 3 interventions?
- b. Who provides Tier 3 interventions?
- c. What is the Tier 3 Structure in your school?
 - i. How are children grouped (e.g., how many in the group and how are groups determined)
 - ii. How much intervention do they receive
 - iii. Where is intervention provided
- d. What specific tools does your school use to provide Tier 3 interventions?
- e. How do you assess the effectiveness of Tier 3 interventions and how often do you assess student progress in Tier 3 interventions?

15) How does your school ensure that instruction and interventions are delivered with fidelity?

- a. How do you know that the curriculum and interventions are delivered as intended?
- b. Is this process included in school improvement or teacher plans?

16) How are decisions made to make referrals to special education?

- a. What data is used to make that determination?
- b. Who makes the final decision to refer?

APPENDIX G: SEMI-STRUCTURED INTERVIEW PROTOCOL #3

Focus: The perceptions of administrators and teachers on the implementation of RTI, and their perceptions of the impact that RTI has had on instructional practices and for improving student outcomes.

- 1) Describe your feelings towards the implementation of RTI?
 - a. What are the positives?
 - b. What were the negatives?
 - c. What would you have done differently?
 - d. What would you have taken away?
 - e. What would you have added?
 - f. What has been the most positive outcome as a result of the implementation of RTI in your school?
 - g. What has been the most negative outcome as a result of the implementation of RTI in your school?
- 2) What do you think the impact of RTI has had on the instructional process at your school?
 - a. Describe the specific changes
 - b. Describe how long it took for these changes to occur
 - c. Has there been resistance and if so, why?
 - d. Has RTI led to a different way to ensure the instructional fidelity of the curriculum? How?
 - e. How do you manage teachers that don't follow these procedures?
 - f. Has teacher evaluation changed to reflect the practice of RTI...has that been positive or negative? Why?
 - g. What are the positives that RTI has brought to the instructional practices in your school?
 - h. What, if any, are the negatives that RTI has brought to the instructional practices in your school?
- 3) What do you think the impact of RTI has had for improving student outcomes?
 - a. How do you know that student outcomes have improved or not?
 - b. What evidence have you seen that shows improvement and do you believe the evidence? Can it be sustained?
- 4) What other thoughts or feelings about the implementation or impact of RTI do you have and would like to share?
- 5) Can you think of anything that I did not ask you in the three interviews that you wished I had?

BIOGRAPHY OF THE AUTHOR

Paul W. Austin Jr. was born in 1963, in Bath, Maine. He grew up in Brunswick, Maine and graduated from Lisbon High School in Lisbon Falls, Maine in 1981. In 1985, he graduated from the University of Maine, in Farmington, Maine with a bachelor of arts degree in psychology. Paul went on to study at the University of Southern Maine, in Gorham, Maine earning a master of science degree in school psychology in 1996, and then the University of Maine, Orono, Maine earning a certificate of advanced graduate study in educational leadership in 2004.

Over the past 25 years, Paul has worked as an educational technician, school social worker, psychological services provider, and administrator in public schools in Maine spanning pre-kindergarten through grade 12. He is currently the superintendent of schools in Regional School Unit 3, serving the towns of Unity, Jackson, Troy, Freedom, Montville, Liberty, Know, Waldo, Brooks, Monroe, and Thorndike, Maine. Paul lives in Nobleboro, Maine with his wife, Lisa. He has four grown children and five grandchildren.