Why Implement RTI?

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*One of the great things is the collaboration between staff—the way
we work together for the benefit of children.*

—Kindergarten teacher

WHAT IS RESPONSE TO INTERVENTION?

According to the National Association of State Directors of Special Education
(NASDSE), Response to Intervention (RTI) "is a practice of providing high-
quality instruction and interventions matched to student need, monitoring
progress frequently to make decisions about changes in instruction or goals
and applying child response data to impor-
tant educational decisions" (NASDSE, 2006,
p. 3). The RTI process is a collaborative effort
whereby educators in a school or school sys-
tem jointly take responsibility to help all
students learn to read. RTI is not a program
or a method for teaching reading. It is a
dynamic problem-solving process in which
data are integral in making decisions about what skills struggling readers
lack and whether intervention instruction provided to date has been effective.
Although RTI can apply to math and other subjects, it's become most popu-
lar for reading instruction in the early elementary years.

> *Response to Intervention is a dynamic problem-solving process in which data are integral in making decisions about what skills struggling readers lack, and whether intervention instruction provided to date has been effective.*

Implementation of RTI in a school revolves around a deep understanding and commitment to a set of beliefs about students and early reading. Four of these fundamental beliefs are as follows:

- Preventive action is better than the wait-to-fail approach.
- Early intervention is more effective than later remediation.
- Universal screening helps prevent students from falling through the cracks.
- Tiers of instruction are available to meet the needs of all students.

These ideas are part of the belief system of schools that have successfully implemented RTI.

The role of RTI is much broader than simply a procedure to determine whether a student qualifies for special education services. The title of a recent publication by the Michigan Association for Administrators of Special Education indicates a broader definition of RTI. In *Response to Intervention: Enhancing the Learning of All Children,* the organization articulates two roles of RTI:

> The narrow role is that of a gate-keeper for eligibility, e.g., it helps to establish that the child's learning problems are not due to lack of appropriate instruction, and to establish that the child's problems are posing such an adverse impact that the child needs special education in order to benefit from his/her education. The larger role is the continued application of the RTI core principles in the IEP [Individualized Education Plan] process itself: problem-solving; using scientific, research-based interventions; monitoring student progress; and using assessment and progress data to make decisions. (Heinzelman & LaPointe, 2006, p. 7)

EIGHT CORE PRINCIPLES OF RTI

> *It may look easy once in place, but getting from where your school is now to full implementation is rarely simple. Many variables affect how difficult the implementation will be, but perhaps the most important one is leadership.*

One of the best resources on RTI is a publication by the NASDSE titled *Response to Intervention: Policy Considerations and Implementation* (2006). This publication lists eight core principles of RTI. These principles cover the important characteristics of what makes RTI much broader than a qualification procedure for special education (Table 1.1).

Lincoln Elementary, the RTI school described in the case study, sounds like a well-oiled machine. In many ways it is because a set of processes and procedures is in place, and the staff knows what to do and how to do it. It

Table 1.1   Eight Core Principles of Response to Intervention

I	We can effectively teach all children.
II	Intervene early.
III	Use a multi-tier model of service delivery.
IV	Use a problem-solving model to make decisions within a multi-tier model.
V	Use scientific, research-based validated intervention and instruction to the extent available.
VI	Monitor student progress to inform instruction.
VII	Use data to make decisions. A data-based decision regarding student response to intervention is central to RTI practices.
VIII	Use assessment for screening, diagnostics, and progress monitoring.

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may look easy once in place, but getting from where your school is now to full implementation is rarely simple. Many variables affect how difficult the implementation will be. Perhaps the most important one is leadership. Implementing RTI is complex and challenging, and so knowing up front *why* you are leading an RTI initiative is important. If you don't believe in it, the journey is going to be very difficult.

It's hard to imagine how anyone can question RTI. It's the right thing to do for children. It's logical and makes sense. Yet some of your staff will resist, not because they don't believe in RTI principles but because RTI entails changing how time is spent, how instruction is delivered, and who works with which students. Some staff will be threatened by changes in things that are so important to them. An unfaltering commitment is essential because you will be presented with many reasons your staff doesn't want to do this. Be ready with answers that show that you've done your research and given this a great deal of thought.

This chapter provides the necessary background information so that principals can respond to questions and challenges. It includes information about the forces that drove the inclusion of RTI in federal laws. There are terms that are important to be familiar with, and it also helps to know a little about how the final version of the Individuals with Disability Education Act (IDEA) 2004 allows for RTI as a process for determining whether a student is eligible for special education services.

Many principals know a great deal about special education law and practices and will choose to skim this chapter. If you don't have a strong background in special education law, this information will help you speak with your special education staff about RTI. Special education teachers are likely to approach RTI with different terminology than teachers in general education. You will have to provide the bridge to get everyone on the same page.

SHAPING THE INITIATIVE

Reconsider the eight core principles of RTI, as identified by the NASDSE in its 2006 publication *Response to Intervention: Policy Considerations and Implementation* (see Table 1.1). These core principles must be important points in your communication plan. They are the fundamental beliefs underpinning RTI, and these principles clarify what to emphasize when discussing RTI implementation with your staff.

WHY RTI IS MORE THAN A SPECIAL EDUCATION REQUIREMENT

The NASDSE suggests a definition of RTI that is broader than merely a qualification approach for students who have reading disabilities. They define RTI as the practice of providing high-quality instruction and interventions and basing decisions on child outcome data, including progress monitoring data. NASDSE provides the following guidance in their publication *Response to Intervention: Policy Considerations and Implementation:*

> RTI should be applied to decisions in general, remedial, and special education, creating a well-integrated system of instruction/intervention guided by child outcome data. (NASDSE, 2006, p. 3)

The NASDSE publication describes an integrated special education and general education delivery model to ensure that all children are making progress, as measured by a student's level of performance and learning rate.

An RTI process may be required by your district or state for the special education qualification process, yet emphasizing this requirement as the main justification for implementing RTI may have a limiting effect. That position makes it too easy for classroom teachers to dismiss this initiative as something that special education teachers are responsible for delivering. From time to time it's helpful to tell a resistant staff member that what you're requesting is required by the government or the district office. This strategy is effective when you want to stop the dialogue and get compliance. However, in the case of RTI, dialogue is critical for building staff buy-in. Because the goal is for the procedures and practices of RTI to become a sustained new paradigm, you'll need deep buy-in for implementation.

Despite the strong links between special education laws and RTI, the premise for implementing RTI has to be built on a much broader and more

proactive foundation. Build your base of support around RTI as the right
thing to do, not the required thing to do. If you tell your staff that the rea-
son the school is implementing RTI is to
comply with special education require-
ments, then it becomes a special education
initiative. Principals who have been
extremely successful in implementing RTI
have walked a very careful tightrope, right
from the start, in positioning this initiative
as a joint effort of general education,
special education, Title I, and English-
language learner (ELL) staff.

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HISTORY OF RTI

The term *Response to Intervention* is not new; however, it has taken on a new
meaning over the past few years. Although the term was previously used
in other educational areas including behavior management, in the past
5 years it has been associated most often with early reading. When RTI
was associated with behavior modification the term described a process
whereby a team of teachers attended a meeting to discuss a problem and
select an approach to deal with a student's serious behavior problems.
The problem-solving approach is transferable to early reading, where
teachers meet to analyze data from curriculum-based measures (CBMs)
of early reading skills and decide on an instructional plan to address
skill deficits.

Before RTI, few schools conducted data meetings using a problem-
solving approach because there were no general education services to
offer a struggling reader. The only services generally available for reading
help were through special education. Often teachers and parents felt that
spending time and energy to qualify a
student for special education services was
a worthy investment. Yet this system has
had many problems. The process of quali-
fying a student for services is lengthy and
often occurs in third grade or later. In
order to receive special education services,
a family has to go through a long and elaborate qualification process that
is procedural in focus and mired in legal hurdles and definitions.

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But beyond the problem of excessive time for the qualification process,
an even more critical problem is that the process occurs too late in a

student's school career. In general, students have to wait to fail at reading before they can receive help. Although the signs of difficulty in reading are almost always evident in kindergarten and first grade, until recently the assessments used at these grade levels didn't bring them to light. The largest number of referrals to special education currently occurs in third and fourth grade.

Many educators hail RTI as a mechanism to solve a whole host of problems in how schools deal with reading difficulties. Some of these systemic problems include the following:

- Identification of reading difficulties too late
- Less effective intervention because it was provided too late
- Disproportionate representation of minority students in special education
- Inadequate first teaching for children referred for testing
- Too many unnecessary referrals of students who didn't meet the special education qualification requirements
- Too many students receiving special education services
- Poor communication between general education and special education teachers serving the same student
- Focus on procedures and paperwork rather than prevention and early identification

FORCES DRIVING RTI

Although pressure for a new approach to special education qualification procedures was a significant factor driving RTI, it is not the only factor. Two other forces converged in the same decade and propelled it forward. The low reading scores in schools, along with the controversy over the implementation of the whole language approach, fueled an unparalleled amount of research about early reading. This research was of a different sort than in the past because the National Institutes of Health (NIH) led a push for higher-quality experimental studies that are scientifically based. As the converging findings from this research were released, one important message to educators was that early intervention can prevent reading problems for many students. Another major force was the widespread availability of a new breed of assessments that make early literacy screening and periodic progress monitoring possible. All these initiatives converged in the same decade, and they are influencing each other and RTI.

Special Education Reform Movement

Consider for a moment whether RTI would have engendered the same wide base of support if special education qualification procedures had been structured differently long ago. If schools used federal and state-designated procedures that led to qualifying students earlier for reading services, there would not have been the call for special education reform that drove the widespread support of a better alternative.

In schools, special education qualification practices have been based on what is known as the discrepancy model, an approach to determine whether a student's achievement is different from what would be expected for his or her ability level. Many schools use IQ tests to define the student's ability, and they use scores from achievement assessments to determine how well he or she is reading. Students are qualified to receive special education if their reading achievement is different from their ability level.

Brief History of Special Education Regulations

The legislative guidelines affecting special education were recently overhauled with the revision of the Individuals with Disability Education Act (IDEA) of 1997 to the more recently approved IDEA 2004. This federal act guides states in how to implement special education services, including regulations governing qualification procedures and student rights. With the recently reauthorized IDEA 2004, one of the most widely discussed provisions is the federal government's allowance of RTI. Because RTI is legitimized in this federal law, states and districts now face the challenge of figuring out how to implement it.

IDEA 2004 is the third in a series of major acts in the last 30 years. In the mid-1970s, the first major special education act was released, called the Education for All Handicapped Children Act of 1975. This act granted students with disabilities rights to receive a free and appropriate public education. Although the 1975 act granted education entitlements to children with physical handicaps and a multitude of disabilities that had formerly kept them out of public schools, it ended up serving children with learning disabilities as well.

One ramification of the 1975 act was a huge surge in the number of students qualified with disabilities. Because the act said that all children are entitled to a free and appropriate public education, there was an all-out effort by schools to find students with disabilities so they could be provided a free and appropriate public education. In the decade leading up to 1998, the number of students age 6 to 21 identified for special education increased 38%. Today 12%–14% of students in U.S. schools receive special education services. Recently the increase has been in students who are slightly older.

The increase in 12- to 17-year-olds was 44% (Lyon et al., 2001). Because of the desire to reduce the number of students receiving special education services and the fact that so many are identified late for services, schools are highly motivated to look at RTI as a way to solve both of these problems.

Reauthorization of IDEA 2004

The reauthorization of IDEA affects RTI in a couple of major ways. IDEA 2004 states that use of the discrepancy formula is not required (and is also not abolished). The regulation also permits RTI for qualification. Some educators are pleased with IDEA 2004. However, many claim that it didn't go far enough by deciding not to follow the recommendation of researchers to prohibit the discrepancy formula. Although there is widespread agreement that the discrepancy formula was problematic, there may not have been adequate common ground for exactly what a replacement should look like. Yet the act did open the door for states to determine whether to use the discrepancy formula at all.

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The two sections of the regulations in IDEA 2004 that relate to this question are as follows:

> Notwithstanding section 607 (b), when determining whether a child has a specific learning disability as defined in section 602, a local educational agency shall not be required to take into consideration whether a child has a severe discrepancy between achievement and intellectual ability. (20 U.S.C. 1414(b)(6)(A))

> In determining whether a child has a specific learning disability, a local educational agency may use a process that determines if the child responds to a scientific, research-based intervention as part of the evaluation procedures. (20 U.S.C. 1414(b)(6)(B))

A major impact is that state education agencies cannot force local education agencies to use a discrepancy formula, and in effect RTI can be used as a model of choice. At least two states (West Virginia and Colorado) announced early on that, as of a specific date, they would stop using the discrepancy model. In most states it will not be an either–or approach of using only the discrepancy formula or RTI. Many states advocate multiple sources of data including RTI data, along with selected psychometric diagnostic data, for the qualification process. Some states will still require components of a comprehensive evaluation, but many in the field believe that some of the psychometric testing that traditionally has been done will be scaled back.

Why the Intense Focus on the Discrepancy Formula?

The discrepancy formula was established because a procedure was needed to determine which children qualify for services. Learning disabilities are difficult to diagnose because there is no physical evidence, and the major symptom is unexpected underachievement. The premise is that students who have the capability to do well as measured by IQ yet are not doing well as measured by achievement assessments must have a learning disability that is prohibiting them from acquiring skills from the general education curriculum. It's the discrepancy between IQ and achievement that establishes the disability.

Experts criticize the discrepancy formula for a number of reasons. Is IQ testing accurate? Is it culturally biased? Part of the problem is that an IQ test is measured at a point in time, typically on one day. Even the most highly reliable tests can produce unreliable results when administered only once, which increases the chance of measurement errors. If alternative forms were available, retesting a student's IQ multiple times over a short period of time would increase the likelihood that the test is reliably measuring the student's level of intelligence.

The other criticism is that measuring cognitive processing does not connect to diagnosing the problem or designing an intervention plan. Many experts believe that intelligence is not a predictor of ability to learn to decode. Intelligence may be related to vocabulary and comprehension strategies but not decoding. Many teachers believe that the battery of tests given in schools to evaluate a student for a learning disability is meaningful only to psychologists, not to the teachers who will be working with the student. Too often the test results sit in the child's file and don't inform his or her instructional plan.

The most troubling criticism is that when the discrepancy formula is used, students with difficulties are identified too late. In order to have a gap that meets the state-designated number of standard deviations between IQ and achievement in reading (2.0 in many states), a student has to be old enough to be reading. Because most schools don't expect students to read until the middle to end of first grade, it's extremely difficult to obtain the designated number of standard deviations of discrepancy until they reach second or third grade. Many view the use of the discrepancy model as a basis for special education qualification as a "wait-to-fail" model. According to Dr. Jack Fletcher (2006), a clinical neuropsychologist at the University of Houston, "We have been working with regulations

> *The most troubling criticism is that when the discrepancy formula is used, students with difficulties are identified too late.*

and procedures that handcuff us and don't enable us to intervene early enough."

As summarized in the NASDSE 2006 publication regarding the work of the National Institute of Child Health & Human Development (NICHD), "One of the most significant implications from this group's work was the nearly irrefutable conclusion that the practice supported by IDEA of using IQ achievement discrepancies to identify SLD (Specific Learning Disability) delays treatment of students beyond the time when interventions are most effective" (NASDSE, 2006, p. 10).

IDEA 2004 Allows Special Education Funds for Prevention

Although the qualification procedure has been the focus of discussion about IDEA 2004, four major changes have resulted from its passage:

- States may not require districts to use IQ tests to identify students as learning disabled.
- States are encouraged to implement RTI as a component of learning disability identification.
- Students cannot be identified for special education without documentation that low achievement is not caused by lack of appropriate instruction.
- Disability categorization must be prevented whenever possible with the use of up to 15% of Part B funds for prevention.

The last one, the allocation of up to 15% of funds for prevention, permits districts to spend money received for special education services to deliver early intervention instruction for students not identified on an Individualized Education Plan (IEP). This includes materials and personnel expenditures.

Before qualification for special education services, the school must provide documentation that the student's low achievement is not caused by a lack of appropriate instruction. Intervention logs are recommended as documentation of the Tier II and Tier III intervention provided (see the case study and Chapter 3 for more information on Tiers I, II, and III). The progress monitoring data provide evidence that the student's skills didn't improve in response to the interventions provided.

Support for RTI From Reading Researchers

As Dr. Sharon Vaughn says, "RTI is an opportunity, not a federal mandate" (Vaughn Gross Center for Reading and Language Arts,

2005, p. 12). It is not required by law, yet it is encouraged and recommended. Consider the broad base of support for this initiative, as evidenced by the number of major policy reports that support it. Over the past 15 years there has been a great deal of research about early reading. It has focused on identifying the skills good readers possess, the skills poor readers lack, and the components of instructional practices that are effective in early reading instruction. The timing of RTI is not a coincidence. It comes on the heels of more than 15 years of reading research, and many of the research findings laid the groundwork.

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Four important policy reports reference findings that support RTI:

1. *NICHD.* This branch of the NIH provides direction and funding for research studies to discover the skills good readers possess and to uncover the skill deficits of students who do not learn to read well. Although the researchers who direct the programs are affiliated with universities throughout the country, the substantial funding provided by NICHD has positively affected the field of reading education. Two of the relevant major research findings are as follows:

- Reading trajectories are established early and are remarkably stable; students who leave first grade behind in reading nearly always stay behind.
- It takes four times as long to intervene in fourth grade as in late kindergarten to improve a student's skills by the same amount (Lyon, 1997, p. 7).

2. *The National Reading Panel (NRP).* A group of 17 experts was convened for nearly 2 years to distill findings about the most effective practices to teach reading. In 2000 the NRP published a report titled *Report of the National Reading Panel (NRP): Teaching Children to Read.* In September 2001 another publication was released, written in teacher-friendly language to summarize the full report, and it is titled *Put Reading First: The Research Building Blocks for Teaching Children to Read.* The second publication has been distributed in schools throughout the country.

The process the NRP used to study the research is one of the landmark contributions of their work. When the NRP convened, one of their first tasks was to establish criteria about good research, and they decided to include only studies that matched those criteria. The NRP reviewed more than 100,000 studies, using a carefully developed screening procedure,

and included in their meta-analysis only the studies that used experimental or quasiexperimental designs and met requirements including minimal sample sizes. Meta-analysis is a technique to quantitatively calculate an overall effect size for a pool of studies. The term "scientifically based reading research" came from the NRP.

Another major contribution of the NRP was to articulate that effective reading instruction should be comprehensive and include instruction in five essential component areas: phonemic awareness, phonics, fluency, vocabulary, and comprehension. The significance of the NRP's work for RTI is that it establishes a gold standard of good curriculum and instruction.

3. *President's Commission on Excellence in Special Education.* President George W. Bush established a committee to recommend improvements to IDEA. In July 2001 this commission published a report titled *A New Era: Revitalizing Special Education for Children and Their Families.* Three major recommendations of the commission are as follows:

- Focus on results, not on process.
- Embrace a model of prevention instead of a model of failure.
- Consider that students with disabilities are involved in general education first and that they also receive extra services.

4. *Fordham Foundation and Progressive Policy Institute: Rethinking Special Education for a New Century.* The Fordham Foundation published a report in 2001 that was positioned as a "state of the union" on special education. The Fordham Foundation's publication was a compilation of articles, the most significant of which claims that many of the difficulties in classifying and defining learning disabilities result from inaccurate assumptions about the causes and characteristics of the disorders. The papers in this publication represent a call to rethink special education. The researchers advocate that sound prevention programs can reduce the number of children needing intensive special education programs and that they should be implemented immediately. In one article, Reid Lyon, Jack Fletcher, et al. (2001) suggest that through early identification and intervention for reading difficulties, the number of children in special education can be reduced by 70%.

These four policy reports are all available online at the Web sites listed in Table 1.2.

Table 1.2 Web Sites for Major Policy Reports

Policy Report	Web Site
National Institutes of Child Health and Human Development, branch of the National Institutes of Health	http://www.nichd.nih.gov/publications/ pubs/upload/reading_centers.pdf
Put Reading First: The Research Building Blocks for Teaching Children to Read and the National Reading Panel's publications	http://www.nifl.gov/partnershipforreading/ publications/reading_first1.html http://www.nationalreadingpanel.org/ Publications/ researchread.htm
President's Commission on Excellence in Special Education	http://www.ed.gov/inits/commissions boards/whspecialeducation/
Fordham Foundation and Progressive Policy Institute: *Rethinking Special Education for a New Century*	http://www.edexcellence.net

Increased Availability of Assessments

Another factor that has contributed to the RTI movement is the release and widespread availability of research-based CBMs. This is important in RTI because in order to evaluate the effectiveness of intervention instruction, one needs periodic progress monitoring assessments. In addition to helping identify who needs intervention, CBM data also help determine the student's rate of progress. CBMs are useful as progress monitoring tools because they are sensitive to

> *Progress monitoring data inform decisions about when to adjust instruction, when to stay the course, and when to exit a student from intervention.*

growth and can be measured frequently. Progress monitoring data inform decisions about when to adjust instruction, when to stay the course, and when to exit a student from intervention.

Until 2002, when Reading First was implemented, the use of these measures was more limited than today. Now they are widely available free on the Internet or at a very low cost. CBM passages provide a more research-based approach than local passages to indicate to teachers whether a student can read at grade level. CBMs provide a benchmark that can be used to make decisions about whether a student is reading at grade level based on a score that was derived from large pools of students nationwide.

RELATIONSHIP OF RTI TO OTHER READING SERVICES

How Is RTI Related to Reading First?

Reading First and RTI are completely compatible initiatives. Reading First regulations embody the same principles as RTI, including screening, assessment, and tiers of instruction. Schools that received Reading First grants were told that they were expected to provide small-group instruction for students who are below benchmark.

Although the requirements of Reading First are compatible with RTI, implementation of intervention groups has been slow in Reading First schools. Many schools dedicated their attention in the first couple of years to implementing their new core reading programs, thereby delaying the initiation of Tiers II and III. Because teachers in these schools lacked the foundational knowledge about the acquisition of reading skills, getting to a point of good teaching using the new curriculum took longer than expected.

Guidelines from the U.S. Department of Education's Reading First staff included the message that the core programs must be implemented "with fidelity." Regulations state that funded schools can't layer new programs on top of old practices. The newly purchased core programs are comprehensive, cohesive, and well designed to integrate the five essential components of reading instruction, as framed in the NRP report.

The focus in 2007 has shifted to jump-starting the Tier II and Tier III layers. Teachers are encouraged to analyze the student data and not just plug all students into one intervention program for Tier II and Tier III. Too many schools have purchased intervention programs and are trying to place all below-benchmark students in one of those programs. Confusion reigns. The concepts of differentiation in intervention instruction and fidelity to the core program seem conflicting to teachers. Although the messages are not conflicting, demonstrating why they aren't is complex.

The concepts of differentiation in intervention instruction and fidelity to the core program seem conflicting to teachers. Although the messages are not conflicting, demonstrating why they aren't is complex.

To make good decisions for differentiated Tier II and Tier III instruction, teachers need to know a great deal about reading instruction. For these students, the instruction in the core program didn't enable them to master the skills. One size doesn't fit all students in reading curricula. Teachers have to use the data to discover which skills the student is lacking. After understanding the core deficits for a student, teachers are prepared to select the best materials available for reteaching the missing skills. To provide effective intervention instruction, teachers must pay more attention to giving the student correction, feedback, and a chance to master the skill in a small group setting.

Confusion About Layering Programs and Materials

In the Reading First Academies, where the U.S. Department of Education trained state leadership teams in the grant request requirements, the topic of prohibiting layering of programs was discussed. The intention was to prohibit use of funds to buy strands of programs and cobble together a core program. For example, they didn't want grant recipients to simply purchase a phonics program and use it in conjunction with some other materials and consider this equivalent to investing in a comprehensive core program designed to carefully integrate instruction in the five essential components. This restriction recognized that the best programs integrate all the components in a well-designed and seamless way, even when the strands are explicitly identified in the teacher's guide. For example, when the teacher's primary purpose is to teach a comprehension strategy during a read-aloud, there may also be a brief vocabulary discussion integrated into a discussion about the story.

The problem now is that many administrators, reading coaches, and teachers in schools that received a Reading First grant are having trouble understanding that they can use intervention programs for Tier II and Tier III that may not cover all five essential components of instruction.

Confusions About the Term Supplemental

The term *supplemental* is used in two ways in Reading First schools. One way refers to using a program to supplement an area of the core that is insufficient for your student population. For example, if your school serves a high ELL population, it may be especially important to use a vocabulary program for 30 minutes a day for all students. In the second sense, some publications call Tier II instruction "supplemental" and Tier III "intervention."

In this book the term "intervention groups" is used for both Tier II and Tier III to avoid confusion and because the focus is on the student's needs, not the programs. Within Tier II groups teachers may gradually try instructional strategies and techniques that are typically associated with Tier III.

How Is RTI Related to Special Education?

Recent criticisms of special education extend well beyond the procedures used to determine eligibility for services. Critics question the effectiveness of the instruction students receive from their special education services. The NASDSE (2006, p. 9) writes, "The benefits of children participating in special education programs compared to their staying in general education programs have been difficult to document unequivocally."

Are the Students on an IEP Included in Three-Tier Intervention?

I recommend providing students who are on an IEP with RTI intervention group instruction in addition to the services for reading they receive in special education. In some schools, the reading intervention students receive in the three-tier model may be more intensive and focused than the instruction they receive in the special education resource room.

It is unrealistic to ask special education teachers to take 10–16 students who are 2–3 years behind their peers and catch them up. These are the students other teachers have been unsuccessful in teaching, and some of these students may have behavior problems as well. Furthermore, schools often ask special education teachers to work with all of these students in one room. That model makes success difficult to achieve. In addition to these difficulties, some special education teachers haven't had as much training in how to teach reading as their general education colleagues.

If RTI is implemented well, then the number of students referred to special education should decrease. This would help because there are too many children in special education to be served with the resources allocated to it. Lyon et al. (2001) suggest that because 80%–90% of students identified as learning disabled were qualified primarily because of difficulties in reading, reducing the number of struggling readers should decrease referrals for special education services.

> *Reducing the number of students with reading problems is critical to success, especially in serving middle school students with reading difficulties.*

Reducing the number of students with reading problems is critical to success, especially in serving middle school students with reading difficulties. As advocated by a team of reading researchers including Reid Lyon, former director of reading research for the NICHD, and Jack Fletcher, NICHD National Advisory Council,

The goal of remedial reading instruction should be to improve reading skills as quickly as possible so the student can "read to learn" in critical content areas. To accomplish this, students, particularly at older age ranges, require highly intensive and systematic instruction provided in settings characterized by low teacher–student ratios. This can only be done when the potential number of children with reading difficulties has been reduced to manageable levels through early intervention. (Lyon et al., 2001, p. 278)

Although practices that are effective for younger struggling readers are well understood, there are still many questions about effective interventions

for middle school students. Studies conducted by Joseph Torgesen and others have shown that intensive interventions can help older children improve their reading accuracy and comprehension, although fluency often remains low. Dr. Torgesen also theorizes that the lack of improvement in fluency may be related to the fact that the struggling older reader has read only a fraction of the cumulative number of words from first grade onward compared with his or her grade-level peers (Lyon, 2001).

If students on an IEP are included in Tier II or Tier III intervention groups, then collaboration between special education and general educators may be encouraged. Currently general education is responsible for the student until there are major problems; then they pass the student to special education. What is needed instead is a system of shared responsibility. When special education and general education work together to implement RTI, the blame, excuses, and finger pointing will disappear.

RTI must be a general education initiative that includes special education as an equal partner. Special education can develop an interest in RTI and bring information to the school. However, special education can't lead the initiative alone. If this initiative resides in special education alone, it will fail. It has to involve general education teachers in the screening, identification, and service delivery systems.

Once RTI is in place, the processes and procedures will serve as a mechanism for qualification of struggling readers into special education. After a student has received repeated rounds of increasingly more intense intervention instruction and his or her skills have failed to improve sufficiently, then the staff can begin to build a case for special education testing. Sometimes these students are called "nonresponders" or "treatment resisters." These terms are misleading because there is nearly always some response to well-taught small-group intervention instruction. "Treatment resister" implies that the student is resisting the treatment rather than that his or her skills are not responding to the instruction provided. I prefer the term "insufficient response." It's a question of degree of response, and I prefer to focus attention on the concept of "insufficient" or "inadequate" response rather than the idea of a nonresponse.

Consider whether the response is what would be expected or sufficient in comparison to the goal. To measure what is expected, compare a student with other students in the same group. If the student in question stands out with a much lower rate of progress than the other students who are receiving the same instruction, this is an insufficient rate of progress. Another consideration is whether the student's rate of progress is sufficient for him or her to reach the benchmark goal; several progress monitoring points falling below the aimline warrants exploring how to intensify instruction.

Grimes and Tilly (2003) suggest that under RTI there are three conditions for eligibility for special education:

- *Insufficient progress:* Previous interventions have not sufficiently improved a student's rate of learning. The criteria of insufficient progress can be met only after several rounds of intervention instruction are provided. After the first round of Tier II is delivered, it is followed by an even more intensive intervention taught well for a reasonable period of time. If the student's scores do not show adequate gains, often in comparison to others who received the same intervention, then the student can be deemed to have made an insufficient level of progress.
- *Level of performance:* The student's performance remains significantly below that of peers or identified grade-level standards. To be considered for special education services, a student would need to be reading well below benchmark or unable to demonstrate mastery of the prereading skills of his peers.
- *Instructional needs:* Additional resources are needed to enhance the student's learning that are beyond what can be provided in general education. Another possible reason to refer a student is if teachers determine that the interventions needed are too demanding to be implemented without access to special education funding and resources.

It is critical that special education and general education become a more seamless series of services available to students. Some schools view special education as Tier IV after a student's skills do not improve adequately in Tiers II and III.

> *It is critical that special education and general education become a more seamless series of services available to students.*

When IDEA 2004 allowed RTI as a qualification procedure for special education, the door was opened for this initiative to reform special education. Additionally, by dedicating up to 15% of special education funding to providing instruction that prevents referrals for IEPs, the federal government has enabled states to outline procedures that are significantly different from those required in the past. This change in the federal provision is an opportunity to integrate the service delivery model in schools so that Tiers II and III are aligned to provide help immediately and monitor a student's progress. These changes should also create a streamlined and much more effective type of instruction that is truly "special" education for students whose skills don't improve sufficiently in the tiers of services available in general education.