Center on Teaching and Learning

Moving Research into Classrooms:

IES Practice Guide - Response to Intervention

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History of Response to Intervention

- Based on Teacher Referral
- Wait-to-Fail approach
- Overuse of IQ-Achievement Discrepancy
- Variation in Prevalence State to State
- Disproportionate Representation of Minorities
RTI: IDEA 2004

- In December, 2004, the Individuals with Disabilities Education Improvement Act of 2004 provided response to intervention as a practice for identifying students with learning disabilities.
- Recommends but does not require abandoning use of the IQ-discrepancy
- Urges early screening and intervention
- Recommends a multi-tiered intervention strategy
- Integrate services between general and special education: the third attempt
What Are Early Intervening Services?

A major change in the law is the emphasis on early intervention services for children “at risk” for academic problems.

The law encourages states to move away from IQ discrepancy and towards a more dynamic type of assessment.

The law encourages early identification of reading difficulties rather than waiting until grade 2 or 3.
Key Principles of RTI

- Incorporate prevention and early intervention rather than waiting until grades 2-3
- Include universal screening to identify student needs
- Effective practices implemented class-wide in general education (primary intervention or Tier 1)
- Successive levels of support increasing in intensity and specificity provided to students as needed (secondary/tertiary intervention)

(Dickson & Bursuck, 1999; McMaster, Fuchs, Fuchs, & Compton, 2005; O’Connor, 2000; O’Connor, Fulmer, Harty, & Bell, 2005; O’Connor, Harty, Fulmer, 2005; Vaughn, Linan-Thompson, & Hickman, 2003)
Potential Benefits of RTI

- Early and targeted intervention for students at risk
- Use increasingly more intensive tiers of instruction
- Early identification through universal screening practices
- Confidence that students who participate in effective RTI models and are referred for special education are less likely to be students who are academic casualties from inadequate or inappropriate instruction

See for review: Fletcher, Coulter, Reschly, & Vaughn, 2004
Tier I is defined differently by experts. 

Only common feature: 
- Universal screening of all students 

Other possible components: 
- Ongoing professional development for classroom teachers on how to use research 
- Differentiated instruction 
- Progress monitoring of all students or of students “at risk” on a monthly or weekly basis 
- High quality reading instruction 
- Scientifically based reading instruction
TIER II: SMALL GROUP INTERVENTION

- Tier II is individual or small-group intervention in addition to the time allotted for core reading instruction.
- Tier II includes curriculum, strategies, and procedures designed to *supplement, enhance, and support* Tier I.
- Can backtrack and/or elaborate/reinforce classroom curriculum.
Tier III is specifically designed and customized individual or small-group reading instruction that is extended beyond the time allocated for Tier I and Tier II.

NOTE: Some states/districts use 3 tiers and other states use 4 tiers.
Assisting Students Struggling with Reading: Response to Intervention (RtI) and Multi-Tier Intervention in the Primary Grades
Assisting Students Struggling with Reading: Response to Intervention and Multi-Tier Intervention in the Primary Grades

The report is available on the IES website:

http://ies.ed.gov/ncee &
Panelists

- Russell Gersten (Chair)
- Donald Compton
- Carol M. Connor
- Joseph Dimino
- Lana Santoro
- Sylvia Linan-Thompson
- W. David Tilly
Recommendation

Level of Evidence

Suggestions for Implementation

Roadblocks and Suggested Approaches
Recommendation 1

Screen students for potential reading problems at the beginning of the year and again in the middle of the year. Regularly monitor the progress of students who are at elevated risk for developing reading disabilities.

- Level of Evidence: Moderate
Evidence

- Five correlation studies have demonstrated that certain types of measures can be used to accurately predict future student performance.
- A series of screening measures can be used to assess proficiency in key areas:
  - Letter naming fluency (K-1)
  - Phoneme segmentation (K-1)
  - Nonsense word fluency (1)
  - Word identification (1-2)
  - Oral reading fluency (1-2)
Suggestions for Carrying Out This Recommendation
Create a building-level team to facilitate the implementation of universal screening and progress monitoring.
Suggestions

Select a set of efficient screening measures that identify children at risk for poor reading outcomes with reasonable accuracy.
Suggestions

Use benchmarks or growth rates (or a combination of the two) to identify children at low, moderate, or high risk for developing reading difficulties.
Roadblocks

It is too hard to establish district-specific benchmarks.
Universal screening falsely identifies too many students.
Roadblocks

Some students may be placed in tutoring when they are only one point below the benchmark.
Recommendation 2

Provide differentiated reading instruction for all students based on assessments of students’ current reading levels (tier 1).

- Level of Evidence: Low
Evidence

- One descriptive-correlational study examined how student reading growth varied by the degree to which teachers employed a specific differentiation program.
  - Differentiation program relied on assessments of group students
  - Student reading growth was higher for teachers with greater implementation fidelity
Suggestions for Carrying Out This Recommendation
Suggestions

Provide training for teachers on how to collect and interpret student data on reading efficiently and reliably.
Suggestions

Develop data-driven decision rules for providing differentiated instruction to students at varied reading proficiency levels for part of the day.
Differentiate instruction - including varying time, content, and degree of support and scaffolding - based on students’ assessed skills.
Roadblocks

Using multiple small groups is difficult when some children have difficulty paying attention, working independently, and interacting with peers.
Recommendation 3

Provide intensive, systematic instruction on up to three foundational reading skills in small groups to students who score below the benchmark on universal screening. Typically these groups meet between three to five times a week for 20-40 minutes (tier 2).

- Level of Evidence: **Strong**
Evidence

Eleven studies met WWC standards or met WWC standards with reservations
Suggestions for Carrying Out This Recommendation
Suggestions

Use curriculum that addresses the components of reading instruction (phonemic awareness, phonics, vocabulary, comprehension, and fluency) and relates to students’ needs and developmental level.
Suggestions

Implement this program three to five times a week, for approximately 20-40 minutes.
Build skills gradually and provide a high level of teacher-student interaction with opportunities for practice and feedback.
Some teachers or reading specialists might worry about aligning the tier 2 intervention program with the core program.
Roadblocks

Finding an additional 15 to 50 minutes a day for additional reading instruction can be a daunting task.
Recommendation 4

Monitor the progress of tier 2 students at least once a month. Use these data to determine whether students still require intervention. For those still making insufficient progress, school-wide teams should design a tier 3 intervention plan.

- Level of Evidence: Low
Of the eleven studies that met WWC standards (or met with reservations) only 3 reported using mastery checks or progress monitoring in instructional decision making.
Why is level of evidence low for progress monitoring?

- Only 3 of the studies of Tier 2 intervention monitored progress at all.
- Those studies used daily or biweekly curriculum-embedded tests.
- These are not what the field considers progress monitoring.
- Conclusion: Need to seriously think about type of progress monitoring used for Tier 2 and Tier 3.
Suggestions for Carrying Out This Recommendation
Suggestions

Monitor progress of tier 2 students on a regular basis using grade appropriate measures. Monitoring of progress should occur at least eight times during the school year.
Suggestions

While providing tier 2 instruction, use progress monitoring data to identify students needing additional instruction.
Suggestions

Consider using progress monitoring data to regroup tier 2 students approximately every six weeks.
Students within classes are at very different levels for tier 2 intervention.
Roadblocks

There is insufficient time for teachers to implement progress monitoring.
Recommendation 5

Provide intensive instruction daily that promotes the development of various components of reading proficiency to students who show minimal progress after reasonable time in tier 2 small group instruction (tier 3).

- Level of Evidence: Low
Evidence

- Although 5 studies were reviewed, none reported statistically significant impacts on reading outcomes.
- Research reveals little about students whose response to typically effective interventions is low.
- Recommendation 5 represents the opinion of the panel.
Suggestions for Carrying Out This Recommendation
Implement concentrated instruction that is focused on a small but targeted set of reading skills.
Suggestions

Schedule multiple and extended instructional sessions daily.
Include opportunities for extensive practice and high quality feedback with one-on-one instruction.
Plan and individualize tier 3 instruction using input from a school-based RtI team.
Suggestions

Ensure that tier 3 students master a reading skill or strategy before moving on.
Roadblocks

Because most tier 3 students have problems with decoding and fluently reading connected text, some may have tier 3 interventions that only highlight these areas.
Roadblocks

School and staff resources are often too limited to support individualized instruction for tier 3 students.
Roadblocks

Adding multiple and extended instructional sessions to a daily schedule can be overwhelming for some students and a challenge for schools in terms of scheduling.
Which recommendations from the Practice guide are the highest priority for you? Why?
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