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The Role of Special Educators in a Multitiered Instructional System

JOHN J. HOOVER AND JAMES R. PATTON



The nature of special education has changed appreciably over the past several decades. As a result, the role of special educators needs to be examined and further developed to provide the most effective education for all learners at-risk and those with high- and low-incidence disabilities. In this article, the authors discuss five important roles in which special educators should possess skills to collaboratively educate learners at-risk within a multitiered instructional system.

Keywords: program delivery; general and special education; collaboration

Changing Placements and Roles

The contemporary trend in education for all learners, including those with disabilities, is education within a multitiered system using the learner's response to instruction as the basis for making instructional and diagnostic decisions. Multitiered learning provides students with a continuum of services (i.e., typically presented as three levels of instruction) that increase in intensity based on the severity of learner needs. Embedded within multilevel instruction is the practice of determining how well the student responds to the interventions implemented, a process termed *response*

to intervention or RTI. According to Bradley, Danielson, and Doolittle (2005),

RTI has been broadly described as a process in which students are provided quality instruction, their progress is monitored, those who do not respond appropriately are provided additional instruction . . . those who continue to not respond appropriately are considered for special education. (p. 486)

Therefore, through multilevel education a student's responses to instruction would serve as the basis for making decisions about instructional needs in today's classrooms.

In addition, as Polloway, Smith, Patton, and Smith (1996) noted 10 years ago, significant changes occur in the perceptions and treatment of individuals with disabilities and continue to evolve over time. Changes in perceptions toward students with disabilities often lead to changes in services provided. Concerning some of these types of service changes, Hoover and Patton (2005) discussed the trend of placements for students with disabilities over a 40-year time span (i.e., the 1960s to the present). They concluded that although the debate over the practice of inclusion continues, “the placement of students with learning and behavior problems into inclusive settings will continue to increase” (p. 28). As a result, over time we have witnessed special education services progress from separate, segregated settings to resource rooms to more inclusive learning environments where students have greater access to the general education curriculum.

Just as services for students with disabilities have changed during each of the past few decades, the role of special educators has also evolved to meet contemporary ways of thinking concerning the most appropriate education for students with special needs. Additionally, whereas effective education of special education students builds upon previous experiences, each time period requires special educators to emphasize targeted knowledge and skill sets to best assume their roles to meet special needs. In today’s inclusive environment, instruction is found within multitiered instructional programming, a situation that challenges all special educators to reevaluate their roles in educating learners at-risk and those who have disabilities.

Multitiered Instructional Programming

Since the passage and implementation of the No Child Left Behind Act (NCLB) in 2001, schools have changed in profound ways. Emphasis on student performance and the requirement that instruction utilize evidence-based interventions are two key features of this law. In addition, all teachers must be *highly qualified*, adding new demands to the changing role of the special education teacher. The 2004 reauthorization of the Individuals With Disabilities Education Improvement Act (IDEIA) incorporated many of the provisions of the NCLB. At the heart of this legislation is the basic tenet that all students with disabilities will have access to the general education curriculum. Central to these ongoing changes within schools is the continued emergence of a multitier approach to provide greater access by addressing the needs of students who display a range of academic, social, emotional, physical, and behavioral difficulties. An underlying premise of tiered instruction is the implementation of early intervention to prevent possible problems from becoming more severe (Vaughn, 2003). To best understand multilevel instruction and its potential implications for students with special needs,

one must become familiar with its (a) overall structure, (b) decision-making parameters, and (c) prereferral aspects.

Structure of Multilevel Instructional Programming

As previously described, multitiered instructional programming is a continuum of services provided to all learners, including those who are at-risk, within the general education system (National Joint Committee on Learning Disabilities [NJCLD], 2005). Whereas these may be referred to as multilevel, tri-level, three-tier, and even four-tier instructional models (Klingner & Edwards, 2006; Vaughn, 2003; Wanzek, 2003; Yell, 2004), they each address similar critical elements for educating learners at-risk. According to Vaughn (2003), tiered instruction provides layers of intervention to meet student needs. Across the tiers, instruction increases in intensity to best meet student needs. Although variations of multitier instruction exist, three-tier models have been frequently discussed and adopted by various school systems nationwide. Recognizing that some may use two or four tiers as discussed above, we will focus our discussions on three tiers, as illustrated in Figure 1. In addition, whereas most illustrations of multitiered learning depict a pyramid illustrated as three distinct sections or levels, we have elected to depict multilevel instruction in a circular figure to emphasize the interconnectedness and interrelatedness of each level of instruction in a dynamic process. This figure was derived in part from discussions found in Hoover and Patton (2005); Vaughn (2003); Vaughn, Linan-Thompson, and Hickman (2003); and Yell (2004).

As shown in Figure 1, the three levels are as follows:

Tier 1: High-quality core instruction. This refers to high-quality, research-based and systematic instruction in a challenging curriculum in general education.
Expected outcome. Students initially receive quality instruction and achieve expected academic and behavioral goals in the general education setting.

Tier 2: High-quality targeted supplemental instruction. This includes targeted and focused interventions to supplement core instruction.
Expected outcome. Students who do not meet general class expectations and who exhibit need for supplemental support receive more targeted instruction. Learners may receive targeted, Tier 2 instruction in the general education classroom or in other settings in the school such as a pull-out situation; however, students receive various types of assistance in terms of differentiations, modifications, more specialized equipment, and technology to target instructional needs. Critical within Tier 2 is the documentation of a student’s responses to the interventions used, which serves as important prereferral decision-making data

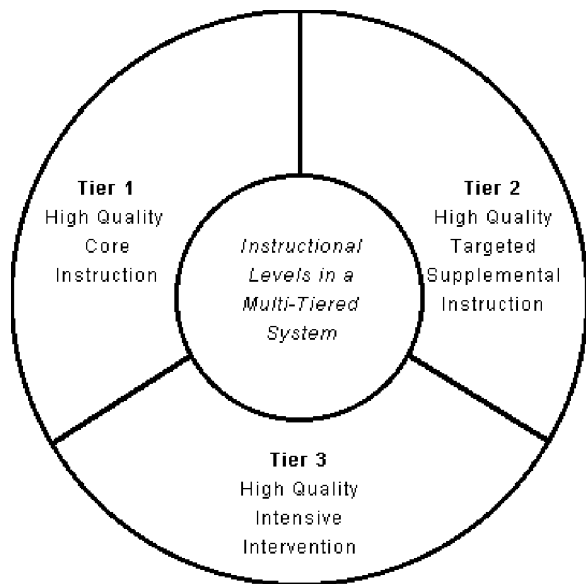


FIGURE 1. Three instructional levels within multitiered instructional programming for all learners.

should more formal special education assessment be determined necessary. Students who make insufficient progress in Tier 2 are considered for more intensive specialized interventions and/or formal special education assessment.

Tier 3: High-quality intensive intervention. This includes more specialized interventions to meet significant needs, including various disability needs.
Expected outcome. Tier 3 provides students who have more significant needs with intensive, evidence-based interventions within a range of possible educational settings.

An effective three-tier model must be dynamic and fluid in providing instructional programming across all three levels, rather than a static instructional service model separated by rigid boundaries between levels of instruction. Within three-tiered instructional programming, students initially are provided Tier 1 core instruction in the inclusive educational classroom. As appropriate, differentiated instruction is implemented within the core instruction. Some students emerge as requiring additional Tier 2, targeted supplemental instruction. This supplemental instruction

1. may occur in the general education setting or other settings within the school,
2. is targeted to specific areas of need, and
3. directly complements the core instruction.

Evidence-based documentation and evaluation of the targeted supplemental instruction is completed, and those students who continue to experience significant educational problems are considered for Tier 3, intensive intervention.

Estimates are that approximately 80% to 90% of all learners are successful with high-quality core instruction; 15% to 20% are estimated to need targeted supplemental instruction; and 1% to 5% will require intensive or special services through high-quality, intensive intervention (Hasbrouk, 2002; Winston, 2006; Yell, 2004). Students within a three-tier educational programming system are not provided formal special education services until (a) they are unsuccessful with the core instruction (Tier 1); (b) make insufficient progress with targeted supplemental instruction (Tier 2); and (c) receive formal special education assessment and placement, including implementation and documentation of appropriate prereferral activities and interventions.

As discussed, students are taught within each tier or level using evidence-based interventions while educators continuously monitor student progress. This monitored progress forms the basis for making educational decisions related to the most appropriate tier within which a student should be educated. This decision-making process is commonly referred to today as decisions based on RTI and is fundamental to making multitiered education effective for all learners.

Multitiered Instructional Decision Making: Response to Intervention

Response to intervention is an essential component of multilevel instruction (NJCLD, 2005). Additionally, it is a practice in which early intervention is emphasized within multiple levels of instruction, along with ongoing progress monitoring to make informed decisions about the education of learners at-risk (NJCLD, 2005). Response to intervention or treatment was initially proposed in the early 1980s to be used as a practice for identifying learning disabilities (Vaughn et al., 2003). Within multilevel instruction, RTI has several elements including use of evidence-based interventions, ongoing progress monitoring, and use of data from that progress monitoring to base educational decisions (Fuchs, Mock, Morgan, & Young, 2003; NJCLD, 2005). Within each of the three tiers of instruction, a student's responses to the interventions are documented, and the data from these measurements are used to make subsequent decisions about the type and intensity of intervention required to best meet the learner's needs. Ultimately, the intent is to have these multilevel evidence-based efforts, along with measured responses to intervention, reduce the need for special education referral and possible placement. This relates to our third important aspect associated with multilevel instruction for learners at-risk (i.e., prereferral interventions).

Multitiered Instructional Model: Implications for Prereferral Intervention

According to Vaughn and Fuchs (2003), the three-tiered process through which a learner progresses may eventually lead to a special education evaluation or placement, if that

student does not adequately respond to the evidence-based interventions that are implemented. Thus, for some students, interventions within a multitiered system become prereferral interventions and are essential to the referral and placement process. In the implementation of three-tiered instruction, prereferral interventions potentially relate generally to Tier 1 (i.e., core instruction) and specifically to Tier 2 (i.e., targeted supplemental instruction) where differentiated instruction occurs to support education implemented in the inclusive classroom. As a result, for some students prereferral interventions become synonymous with targeted supplemental instruction found primarily in Tier 2, with efforts beginning in Tier 1. To be most effective for learners at-risk, special educators must continue to provide direct and collaborative support in Tiers 1 and 2 as selected interventions are implemented and results documented, to be used if and when formal special education referral and assessment are determined necessary.

Overall, as discussed, effective interventions in Tiers 1 and 2 are expected to help reduce inappropriate special education referrals and/or the need for extensive Tier 3 instruction. However, as students progress through the tiers, documentation of interventions (and associated responses to that instruction) becomes essential prereferral intervention information, if formal referral to special education results. In the three-tier model, formal referral to a child-study team for special education assessment is a latter-stage, Tier 2 event, should supplemental support be unsuccessful at meeting student needs. But it is prior to formal placement in special education as a component of Tier 3.

As the education of all students within multitiered or three-tiered systems intensifies and expands, it is important to reevaluate the role that special educators must assume to best meet the needs of all learners. The roles of special educators have evolved over time and have changed commensurate with contemporary educational mandates and prereferral instructional parameters. Today, special educators are challenged with meeting changes associated with multitiered instructional programming. To best understand these evolving roles, we begin with an historical overview of the role of special educators over the past several decades, relative to previous instructional models.

Historical Overview of the Evolving Role of Special Educators

As far back as the 1960s, the Council for Exceptional Children (CEC) has been developing, refining, and promoting professional standards and competencies for teachers of students with disabilities (O'Shea, Hanmittee, Maninzer, & Crutchfield, 2000). Every decade since that time has seen revisions and upgrades to the professional competencies (CEC, 1998b). Overall, the CEC professional

standards include a variety of knowledge and skill sets related to select areas such as leadership, communication, instruction, assessment, or collaboration. Revisions to professional standards throughout the decades reflect, to a great extent, the professional thinking concerning the education of students with disabilities, especially as educational placements and services change. Since the 1960s, services for students with special needs have evolved from placement in self-contained classrooms, to resource rooms, to inclusion settings. As a result and over time, professional standards and associated instructional parameters for educating students with disabilities have also evolved (CEC, 1998a).

For example, during the 1960s a primary role of special educators was the education of learners with disabilities in self-contained classes being taught with special materials and strategies (e.g., Kephart, Frostig Methods). Skill sets required of special educators during this time included knowledge of highly specialized programs, ability to teach numerous content areas, and implementation of special techniques or strategies used to address disability needs (e.g., process training or teaching toward the visual modality). However, as the effectiveness of process-related practices came into serious question (Hammill, 1972), more direct teaching strategies emerged requiring special educators to assume new roles in implementing instruction. Also, during the 1970s, placement issues surfaced following Dunn's historic article (Dunn, 1968), which questioned the practice of special, self-contained education. As a result, a different concept of education emerged for students with special needs (i.e., resource room and direct instruction) in which students with disabilities were educated in the general education classroom while being pulled out only for times where specific remediation was necessary in academic areas (e.g., reading) (Gearheart, Weishahn, & Gearheart, 1991). To support this form of education, the role of special educators evolved from one of educating the same learners all day in one classroom to the role of providing remediation in specific instructional areas for part of the school day for many different learners, along with providing support to general classroom teachers. Examples of knowledge and skills required of special educators to implement their resource room role included the abilities to remediate core content area needs, manage a classroom in which many students come for select periods of time and then return to the general education class, and maintain strong working relationships with a variety of staff, as well as consultation skills to work with the general classroom educators (Harris & Schutz, 1986; Wiederholt, Hammill, & Brown, 1993).

The 1980s saw continued movement toward the strengthening of education for students with disabilities in the general education classroom on a more full-time basis. Within this form of education, students with disabilities received their primary education in the general education classroom, while also receiving some support, if

needed, through the resource room concept (Gearheart et al., 1991). This form of education (i.e., mainstreaming) saw the role of special educators continue to move toward the combined tasks of providing direct instruction along with providing supports to the general education teacher (McCoy & Prehm, 1987). Knowledge and skills necessary to best support this role included abilities to consult with other educators, develop educational programs to be implemented in the general education classroom, and involve parents in the education process, as well as to be knowledgeable of a variety of teaching and behavior strategies that may be used in the general classroom to meet a variety of special needs. The efforts of the 1980s were built and expanded upon in the 1990s, when the emphasis on inclusion in the general education classroom and education process occurred. This initially began with inclusive classrooms but quickly moved into the broader concept of inclusive schools (Fisher, Frey, & Thousand, 2003; Kauffman & Hallahan, 1995). The role of special educators during this time included greater emphasis on collaboration with general education to best meet a wider range of special needs in the general education setting. Similar to the other time periods, select knowledge and skills were needed by special educators to best address their roles in meeting special needs through inclusion. These included skills such as differentiating instruction, monitoring student progress, assessment, or communication (Fisher et al., 2003).

Currently, as we progress through the first decade of the 2000s, students with disabilities will increasingly receive their education within multitiered instruction using response to intervention as the primary basis for decision making. Similar to previous decades of education (i.e., self-contained classrooms, mainstreaming), special educator roles must continue to evolve to meet new multitiered instructional programming demands to best address all students' needs.

Emerging Special Educator's Role in Multitiered Instruction

The integrative role between special and general education within a multitier instructional model is an emerging construct, which must build upon previous collaborative efforts associated with mainstreaming and inclusion. Overall, several significant challenges exist for special educators in their roles within multilevel instruction including (a) ensuring that seamless levels of support exist among and across tiers (i.e., interrelated structure), (b) providing the most appropriate education for learners at-risk and those with disabilities (i.e., response to intervention decision making), and (c) supporting appropriate instruction for all learners to reduce inappropriate referrals to special education (i.e., prereferral interventions). Given this current trend in education, multitier instructional

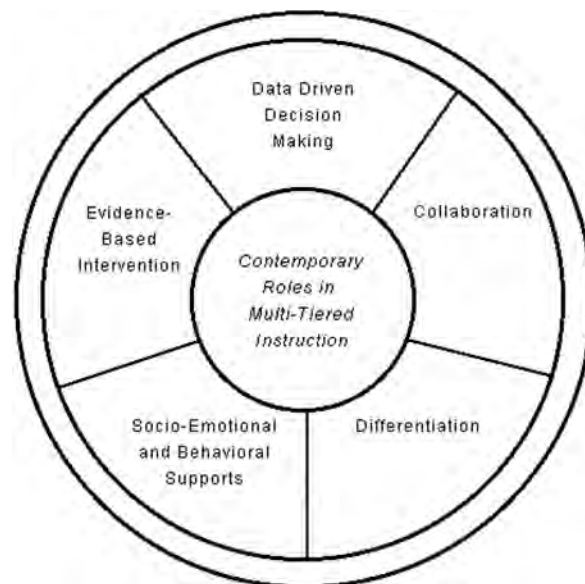


FIGURE 2. Five contemporary role areas for special educators in multilevel instruction.

models hold promising opportunities for learners at-risk and those with special needs if they are implemented in collaborative ways among general and special educators.

The predominant themes associated with multilevel instruction currently impacting the special educator's role in today's schools emphasize full access to the general education curriculum, evidence-based education, behavior supports, and data-driven accountability (Crone & Horner, 2003; Fisher et al., 2003; Hoover & Patton, 2004; Vaughn & Fuchs, 2003). Roles reflecting these areas can be conceptualized as contemporary because they are necessary to implement instruction within current educational philosophy and services for students with disabilities. The roles needed for successful special education in schools today build upon those of previous decades and, in some instances, are far more extensive than those of the past.

To make multitiered instruction successful for all learners, including those at-risk who may eventually be placed into special education, special educators must assume roles that support current three-tier practices (Hoover, 2006; Vaughn, 2003; Yell, 2004) as well as an evidence-based, data-driven instructional emphasis (Crone & Horner, 2003; Hoover & Patton, 2004, 2005; Moran & Malott, 2004; Odom et al., 2005; Skrtic, Harris, & Shriner, 2005; Thomas & Pring, 2004). Five of these roles are illustrated in Figure 2. Although these are not all-inclusive, they represent five critical areas in which special educators must become more highly proficient.

As shown, five roles are identified:

Role 1: Data-driven decision maker. Student responses to instructional interventions should be documented to

monitor progress to make informed educational decisions (Vaughn & Fuchs, 2003).

Skill sets: This role includes skills necessary to develop and implement ongoing data-based monitoring of students' academic performance and social-emotional development. Although assessment has always been a key component of the special educator's role, the nature of assessment and the use of results have changed significantly in recent years.

Role 2: Implement evidence-based interventions. Accountability in education to demonstrate student achievement and growth is to be grounded in scientific or evidence-based practice (U.S. Department of Education, 2002).

Skill sets: This role includes skills necessary to support and implement evidence-based, high-quality *core and targeted supplemental instruction* as well as *intensive intervention*. Initiatives that promote the use of research-based practices that have been demonstrated to be effective with learners at-risk and those with special needs have become commonplace in the educational literature (CEC, 2006; Odom et al., 2005) and endorsed by the NCLB.

Role 3: Differentiate instruction. Multitiered instruction may require the implementation of differentiated or modified instruction to meet learning needs (Vaughn, 2003; Vaughn et al., 2003).

Skill sets: This role includes skills necessary to provide differentiated instruction to learners at-risk in a variety of educational settings. Whereas the fundamental concept underlying this skill set is not new, the application of a philosophy that focuses on the differential needs of all students has taken hold in general education through multilevel programming.

Role 4: Implement socioemotional and behavioral supports.

Specifically required by IDEA is the functional assessment of behavior and related behavior supports in schools for learners at-risk who have significant behavior needs (Crone & Horner, 2003).

Skill sets: This role includes abilities necessary to develop, implement, differentiate, and evaluate effective classroom environments for successful education of all learners within a multilevel instructional model. A supports-based orientation to working with students who display a range of social, emotional, and behavioral challenges has become the standard on which interventions are based. These are particularly relevant in multilevel instruction.

Role 5: Collaborator. Collaboration is a necessary and sometimes required practice to meet IDEA mandates associated with services in special education (Friend & Cook, 2003).

Skill sets: This role includes effectively interacting with and supporting other educators in their efforts with learners at-risk and/or those with special needs in inclusive class settings. The multitiered instructional movement has made this role extremely important, given the need for special educators to work within a tiered system that keeps learners who are at-risk in general education settings to the greatest extent possible.

For each of these five main roles, a variety of specific subskills exist. Examples of key subskills developed by the authors from discussions about these topics in several literature sources are provided in Table 1.

Specific skills necessary for successful implementation of each role are provided. These literature-based subskills reflect critical skills that special educators must possess, at a minimum, to effectively implement the five roles. Also, skills identified may overlap given the dynamic nature of the multitiered educational process. Although they are not new professional competencies, these roles (and associated subskills) reflect five of the most current emphases in the education of learners at-risk and those with special needs educated through multitiered instruction.

Implications for Special Educators

Whereas the significance and importance of the five roles and associated skill sets are discussed in the literature, additional research is needed to determine the extent to which teachers possess these abilities. Also, further research should focus on the following questions:

1. What are the implications for learners at-risk who are referred for special education if special educator collaboration and support are not included in Tiers 1 and 2?
2. How might existing prereferral interventions support multitiered instruction for all learners at-risk?
3. Which types of assessment practices would assist teachers and prereferral teams to generate more useful information for education in Tiers 1 and 2?
4. What specific administrative supports do special educators require to ensure that appropriate evidence-based interventions are initially employed in Tier 1 and as supplemental instruction in Tier 2, prior to formal referral and/or assessment for special education?
5. What safeguards are in place within three-tier learning to allow a student with a disability to appropriately progress out of Tier 3, or to receive Tier 3 services as soon as necessary and appropriate based on needs?
6. How do professional development and teacher preparation programs need to change to equip special education teachers to assume key roles at all levels of a multitiered educational system?
7. How are culturally and linguistically diverse needs met within a multilevel system of instruction?

TABLE 1. Special Educator Roles and Associated Subskills in Multitiered Instruction

Role	Subskills
Data-driven decision maker	Curriculum based measurement Strategies for effective decision-making Data analysis Multiple monitoring strategies Basic skills assessment Functional skills assessment Special education eligibility Process/criteria
Implement evidence-based intervention	Knowledge of core disciplines Higher order thinking skills Evidence-based instructional strategies Task analysis/direct instruction Programmed instruction Impact of culture and language on learning Determining difference versus disability Functional living and transition skills Mastery learning
Implement socioemotional and behavioral supports	Classroom management Behavior management Applied behavioral analysis Targeted behavioral supports Social skills instruction Self-management skills instruction Impact of culture and language on behavior Social emotional development Functional behavioral assessment Positive behavioral supports
Differentiate instruction	Accommodations and modifications Differentiation strategies Second language acquisition Culturally relevant instruction Sheltered instruction Study skills and learning strategies Student peer-tutoring models Targeted academic learning time (time, task focus, intensity) Scheduling strategies Alternative curriculum and materials Adapting to address
Collaborator	Functional living abilities Communication skills Coteaching/team processes Consulting/coaching Change strategies Parent-school-community partnerships Cultural/linguistic diversity and collaboration Working with parents on individualized education program (IEP) and disability-related issues Knowledge/understanding of the Individuals With Disabilities Education Improvement Act Amendments of 2004 (IDEA) Knowledge of district special education referral and assessment process

Note. The various subskills were generated from discussions found in the following sources: data-driven decision making, Vaughn and Fuchs (2003) and Hoover and Patton (2005); evidence-based interventions, Moran and Malott (2004); socioemotional and behavioral supports, Crone and Horner (2003); differentiation, Hoover and Patton (2005); collaboration, Idol (2002) and Hoover and Patton (2005).

Conclusion

The role of special educators in the implementation of multitiered instructional programming is essential to provide appropriate education for all learners at-risk and those with special needs. Whereas education in Tier 3 is mostly directed at students with more significant needs, including disability needs, learners at-risk must also receive support and advocacy from special educators in Tiers 1 and 2. Overall, the nature of providing education to learners at-risk and those with disabilities has changed. In some instances, practices of the past have become less effective or are no longer tolerated in schools. Concomitantly, roles and responsibilities have changed, and increased competence in a variety of existing, new, and different roles now is required. Knowing how the system has changed, what demands this system presents, and which skills will be necessary to possess will ensure that special educators continue to play key roles in the multilevel education of students considered at-risk or those having special needs.

This article discussed five of these important roles that special educators should possess to collaboratively educate learners at-risk within a multitiered instructional system. The national efforts to expand the use of multitiered instruction in our schools will continue to impact students with various disabilities. As a result, proficiency with evidence-based interventions, data-driven decision making, socioemotional and behavioral supports, instructional differentiation, and collaboration is necessary to meet the needs of all learners educated through a multitiered instructional system. Additionally, as special educators expand their knowledge of response to intervention, knowledge of the operations of multitiered instruction becomes increasingly more critical.

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