
HVED Scientific Research-Based Intervention Practices

Formerly Titled
“HVED Rtl Implementation Manual”

Appendix A

**HVED Scientific Research-Based
Intervention Practices**

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Introduction:

The authorization of IDEA 2004 provided districts with the opportunity to exercise their choice in identification of students with Specific Learning Disabilities. The law allows districts to implement a system of Scientific Research-based interventions (SRBI) prior to referral to determine a student's response to intervention. As a result, Hiawatha Valley Education District (HVED) has adopted a Response-to-Intervention/Scientific Research-Based Interventions (RtI/SRBI) Model for identifying at-risk students. While this document primarily addresses the needs of students with academic concerns, HVED is committed to using the problem solving process to address the needs of all students identified as at risk, including those with both academic and behavioral concerns.

The RtI/SRBI model is based upon the provision of high quality instruction and interventions that are matched to student needs; frequent monitoring of student progress in order to make changes in instruction or goals; and the application of those data to important educational decisions. RtI/SRBI focuses on early identification of learning needs, and the provision of appropriate evidence-based interventions in order to address skill gaps early to keep them from becoming larger issues.

RtI/SRBI is intended to be a general and special education, integrated school-wide system that provides instruction, support, enhancement and intervention to all children and youth. Special education and related services are not seen as separate entities in this model, but rather are provided within the context of the overall RtI/SRBI system. HVED will work with member districts to blend district plans for Reading Well by Third Grade which utilizes Multi-Tiered Systems of Support (MTSS) and the process used as part of an eligibility determination.

Basic Assumptions for implementing RtI/SRBI:

- All children can be effectively taught.
- Students are provided with high quality, research-based instruction in the regular classroom.
- It is important to intervene early.
- Schools employ universal screening and progress monitoring to inform instruction.
- A strong majority (recommended goal of 80%) of students in a class are making targets/benchmarks from core instruction.
- Schools use a multi-tier model of service delivery.
- Schools use a problem-solving method to make decisions within the multi-tier model.
- Instructional decisions are data-based.
- Research-based, scientifically validated interventions are implemented with integrity.
- Assessments are used for three different purposes: 1] universal screening to identify students who are at-risk of school failure, 2] diagnostics to determine what children can and cannot do in important academic and behavioral domains, and 3] progress monitoring to determine if interventions are producing desired effects.

Three Tier Model of Service Delivery

The Hiawatha Valley Education District uses a Three Tier Model of service delivery for the implementation of RtI/SRBI. This system incorporates increasing intensities of instruction provided in direct proportion to the individual needs of students. Ongoing assessment of students' proficiency on critical academic skills is an essential aspect of the system. Frequent progress monitoring data are used to inform instruction at each tier and also to identify the appropriate level of service for each student in a timely fashion. The student's response to research-based interventions, based on the progress monitoring data, is used as one aspect of the data on which

decisions are made. Other types of data that may be considered include, but are not limited to, attendance at the intervention, second language skills, integrity implementation of the intervention plan, behaviors. General educators play an instrumental role in identifying strategies that produce substantial learning outcomes for all students.

[Link to Minnesota state SLD manual, Chapter 3: Screening and Identifying Students for Intervention](#)

<http://www.education.state.mn.us/MDE/EdExc/SpecEdClass/DisabCateg/SpecLearnDisab/index.html>

As districts periodically and systematically review their data to identify students in need of intervention, teams should pay careful attention to whether they are using norm-referenced or criterion-referenced targets. If district teams are using norm-referenced targets, they should identify the norm group on which the targets are based (e.g., school v. national norms).

[Link to Directions for selecting and interpreting school v. national norms in AIMSweb](#)

Use the flow chart and the HVED problem solving forms linked below to document your team's problem solving process. Member Districts may develop and adopt their own forms. The critical aspect of the forms is to document and standardize the problem solving process to ensure students receive the supports they need. Teams should be aware that regardless of which method of eligibility determination they have chosen (ABC or ABD) to use there is a requirement to implement and collect data on the systematic pre-referral interventions.

HVED problem solving forms

CH. 3: SCREENING

Criteria for ABC route in Green

Parent or staff raises concerns about a student's performance.

Should we request interventions to improve performance?

Parent and pre-referral team identify the student needs.

Criteria for ABD route in Yellow

Use valid and reliable measures to benchmark performance 3x/year.

Who needs intervention?

Verify screening data and select student for intervention.

Criteria for both ABC and ABD routes in Yellow / Green

What are the data indicating? What research-based strategies or interventions should we use?

CH. 4: IMPLEMENTING SRBI

Verify needs, data, and instructional strategies or interventions with parent.

Should we move forward with an evaluation for Special Education?

Match interventions to student needs.

Document Intervention Plan.

Implement instructional strategies or interventions.

CH. 5: MONITOR PROGRESS

Monitor progress using valid and reliable measures.

Send data to parents regularly.

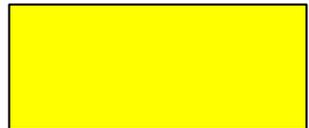
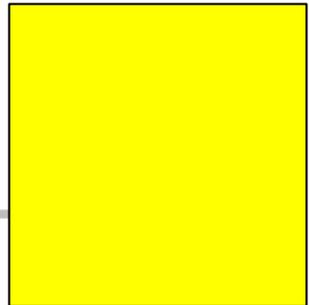
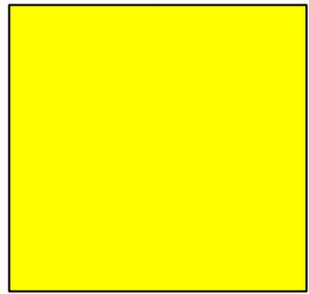
What are the data indicating?

Is an evaluation requested by the parents?

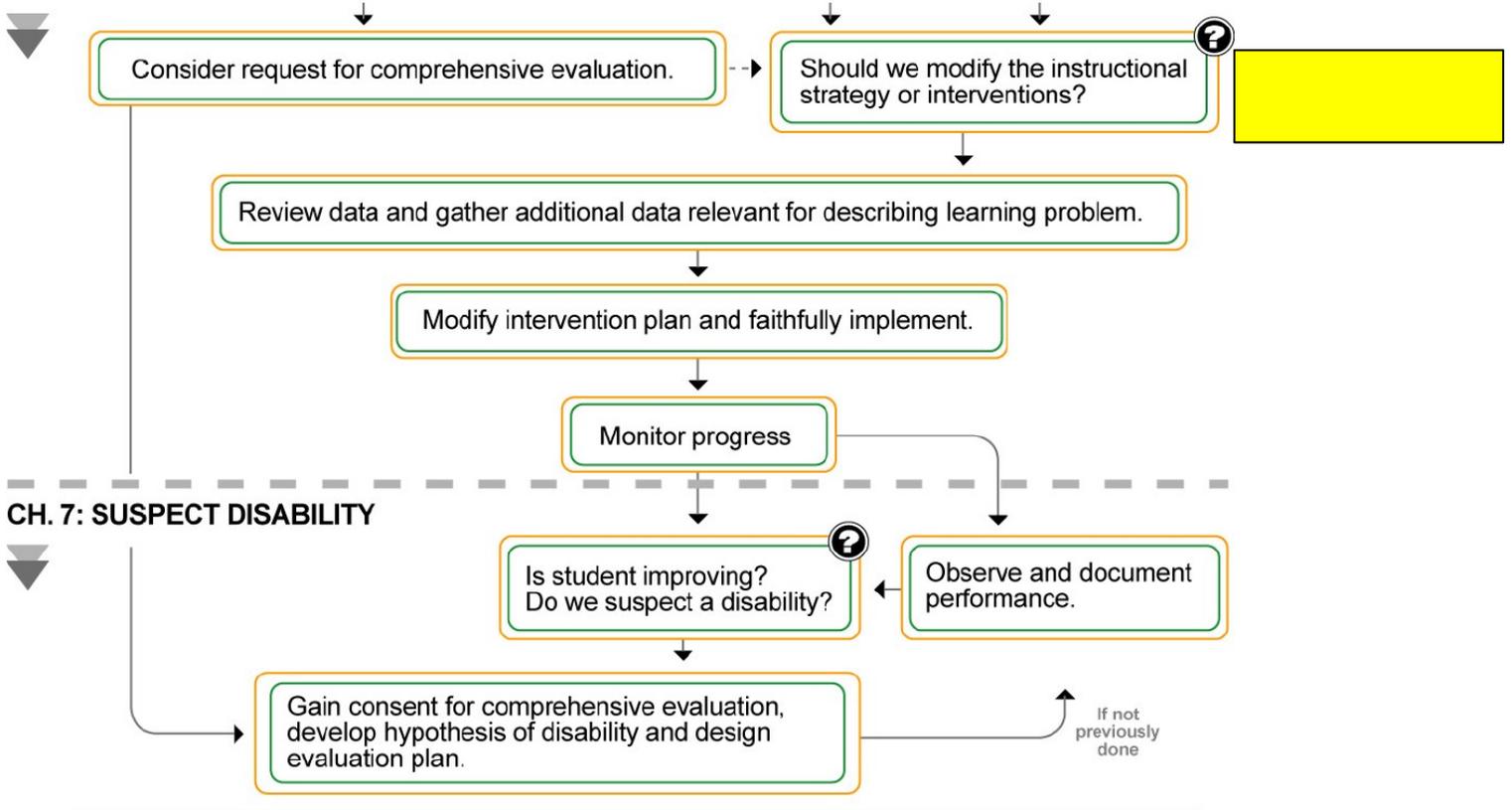
Follow decision rules established in pre-referral intervention plan.

Follow decision rules as outlined in district system of SRBI (TSES) plan.

Line continues



CH. 6: MODIFY INTERVENTIONS



Tier 1: School districts provide a core instructional program in the general education setting that uses a scientifically validated curriculum that has a high probability of bringing the majority of students (with the goal of at least 80%) to acceptable levels of proficiency. This curriculum should produce adequate levels of achievement, and instruction should be differentiated within the core curriculum to meet a broad range of student needs. Core instruction is defined as instruction within the general education classroom, delivered by the general education teacher.

During the provision of this core instruction, schools should be doing universal screening in basic skill areas at least 3 times per year in the Fall, Winter and Spring using a tool validated in research, in order to identify each student's level of proficiency. These data can then be analyzed in order for teachers to set group goals for the next assessment period and plan for whole-class instructional change. When core instruction is sufficient and provided with fidelity to the program's design, the students who do not meet targets should be considered for Tier 2 interventions.

[Link to Minnesota state SLD manual, Chapter 3: Screening and Identifying Students for Intervention](#)

Tier 2: Tier 2 involves supplemental instruction provided in addition to core instruction. The method of delivery of the intervention can be developed through a problem-solving process or through implementation of a standard treatment protocol. Parents should be notified when students participate in Tier 2 instruction.

Standard Treatment Protocol Interventions: Provide evidence based practices (from a menu of available interventions) to those students who display predictable difficulties at this stage (e.g., failure to develop early literacy skills). These interventions are designed to be used in a systematic manner with all

participating students, are usually delivered in small groups (often 3-6 students) and are typically very structured. Progress is monitored frequently and instruction is adjusted based on student response. It is critical for teams implementing the standard treatment protocol to have a strong understanding of the underlying principles and components of the STP. Teams need to know what aspects of the program are alterable and which are foundational to the research behind the program and therefore need to be implemented as described in the manual. STPs should be in alignment with the core curriculum so that students are able to generalize the skills learned in intervention to those being taught in their core classroom. Group configurations should be flexible based on individual student response to instruction.

Problem-Solving Interventions: Teachers bring student concerns to the problem-solving team. The problem-solving team would use a process that involves functional academic assessments to identify the magnitude of the discrepancy from peers, agree upon reasons why students are not mastering the required academic skills at the same rate as their peers, and then develop individualized interventions to address the identified need. Progress is monitored frequently, and instruction is adjusted based on student response. Group configurations should be flexible based on individual student response to instruction.

[Link to Minnesota state SLD manual, Chapter 6: Modifying Interventions](#)

[Link to Minnesota state SLD manual, Chapter 5: Repeated Assessment and Progress Monitoring](#)

[Webinar on Progress Monitoring for teams who would like a refresher or training on procedures for tracking student progress.](#)

Tier 3: Tier 3 support in HVED districts should not be thought of as being synonymous with Special Education services. Special Education services are one type of intensive service that could be provided within Tier 3 if the student meets eligibility criteria, but there should be other general education systems in place to provide Tier 3 support to students as well.

In Tier 3, intensive instructional interventions are identified to increase an individual student's rate of progress. Response to the Tier 2 intervention should be analyzed to help teams design an effective Tier 3 intervention. Individual diagnostic assessments may also be done to determine specific patterns of skills that the individual has and does not have, for the purpose of designing effective instruction to remediate the student's deficits.

In Tier 3, the specificity, intensity (group size and/or frequency or time), and/or duration of the interventions delivered to the student are typically increased. Instruction is uniquely tailored to individual students with data gathered at least weekly and a focus on individual goals. Decisions are made based upon predetermined rules and specific timelines laid out in the student's written intervention plan. Specialists, other staff, and parents should be informed and involved in the process.

Essential components for Tier III general education interventions include:

- Consultation between general education and special education instructional/support staff for purpose of designing effective interventions.
- Measurable and targeted attempts to solve the problem
- Documented communication with parents for the purposes of informing about the intervention and gathering of background information about the child (See SLD Manual Chapter 4, p. 24; chapter 6, p. 9 and chapter 7, p. 24 for possible interview questions).
- Collection of data related to the presenting problem
- Individualized intervention design implemented with integrity
- Systematic progress monitoring to measure effects of the intervention

Comprehensive Evaluation for Determining Eligibility for Special Education

Although moving to a comprehensive evaluation is not the end goal of the RtI process, some students may not respond to interventions and therefore require a comprehensive evaluation. RtI data may be used as part of the determination of eligibility for special education. Because of the high stakes nature of labeling a child as disabled, it is critical that data collected during the RtI process is valid and reliable. Teams who adhere to the procedures described above and who complete the required readiness procedures below may decide to exercise their choice and use the ABD process when conducting a comprehensive evaluation. Teams who use the ABC process will also need to incorporate the pre-referral data into the evaluation summary report.

When developing an evaluation plan, teams should determine what questions they still have that current data is not able to answer. The evaluation plan will then be developed to answer those remaining questions. One part of that plan, if considering Specific Learning Disabilities, is to determine if the student's achievement is at or below the 5th percentile. This score needs to come from a standardized assessment tool that was administered prior to, during intervention or as part of the comprehensive evaluation process.

For more information about the comprehensive evaluation procedures please see the MN SLD Manual. (**put link to chapter here**)

Districts or buildings considering transitioning to using RtI (A-B-D) criteria for determining whether a student is eligible for Special Education services under the Specific Learning Disability (SLD) category must verify that they have all of the required components in place. Teams need to consider the following components when determining if they are ready to use ABD:

1. *Whether or not their data collection procedures are carried out with fidelity.*
2. *If they have an effective problem-solving process in place.*
 - a. *Who is on the team?*
 - b. *Is team membership representative of the building?*
 - c. *How and when will they meet?*
 - d. *What data are they using?*
 - e. *Where will documentation be stored?*
 - f. *What role does the team plan in setting up interventions?*
3. *Prior to exercising their choice to use the ABD criteria teams must review the "[HVED Scientific Research-based Interventions Practices Manual](#)" document for accepted procedures.*
4. *Teams (this should not be done by one individual on the team) need to complete submit it to their cluster director the [RtI School Readiness Self-Assessment](#)*

- a. *Each year thereafter, teams need to revisit the document and make any changes to it. This must be submitted to their cluster director by Sept 15th of that year.*
5. *The cluster director will acknowledge receipt of the document and verify that the district is ready to exercise their choice.*
6. *Districts should be aware that they may be ready in one curricular area before all areas are fully established. the associated documents referenced therein*

Other forms that may be helpful to the teams:

7. [*\(HVED SLD Eligibility Criteria Worksheet,*](#)
8. [*Sample Initial SLD Report ,*](#)
9. [*RtI School Readiness Self-Assessment.*](#)

Key Definitions:

Response-to-Intervention (RtI): Evaluating whether a student is benefiting from a scientifically-based instructional program through frequent and continuous measurement of performance and data-based decision-making. Special education services may be provided to those students meet eligibility criteria due to a failure to respond to well-designed interventions, experiencing low achievement, and do not demonstrate evidence for exclusionary criteria.

Scientific Research Based Intervention (SRBI): This is a term often used interchangeably with terms like evidence based or research based intervention or RtI. Instructional techniques, interventions, or curriculum that are based on studies that (a) use empirical methods, (b) include rigorous and adequate data analyses, (c) use measurements or observational methods that provide reliable and valid data, (d) employ experimental or quasi-experimental designs, (e) are replicable, and (f) undergo a formal peer review process.

Problem-Solving Model: Solutions to instructional and behavioral problems are generated by a team through a Five Step process: (1) Problem Identification, (2) Problem Analysis, (3) Plan Development, (4) Plan Implementation, and (5) Plan Evaluation.

Standard Treatment Protocol: Requires the use of the same empirically validated treatment for all children with similar problems. It is generally delivered in small groups and is often very structured. Often Standard-treatment protocols are a multi-faceted to meet aspects of the area of concern. Progress is monitored frequently and instruction is adjusted, based upon student response.

Criterion-referenced targets: Performance on benchmark assessments, using General Outcome Measures, is linked to performance on the state mandated Minnesota Comprehensive Assessments-II. This creates a series of criterion-referenced target scores at each grade level/assessment period for a General Outcome Measure, such that students who are at or above the target score have a high probability of reaching grade level proficiency on the upcoming MCAs. [There are two tiers of target scores] Students scoring at the Tier I target have a 75% likelihood of passing the MCA-IIs. Students scoring at the Tier II target have a 25% likelihood of passing the MCA-IIs. Additionally, in establishing the targets, the aim is to have the accuracy of predictions of success on the MCA-IIs not fall below 80% (i.e., aim is to establish the target such that 80% of the students predicted to pass the MCA-IIs do indeed pass them).

Norm-referenced targets: Norm-referenced targets provide information about how a student performed relative to some comparison group. For example, a student who scores in the 50th percentile performed as well or better than 50% of the students in the comparison group. This score would likely be considered in the “average” range of students nationwide, depending on the purpose of the assessment.

Curriculum-Based Measurement (CBM): A reliable and valid assessment system for monitoring student progress in basic academic skill areas such as reading, writing, spelling, and mathematics. CBM procedures, including test administration, scoring, and interpretation, are standardized. The content of the CBM tests may be drawn from a specific curriculum or may represent generalized outcomes for a student at that grade level. In either case, CBM test content represents important, global outcomes for the year and not just an individual objective or series of objectives representing current instructional lessons. Students are given short alternate assessments of these important grade-level skills frequently across the school year and their scores are plotted on a graph. Teachers are then able to use these CBM scores in a formative way to gauge student progress over time.

Universal screening/benchmark assessments: Regular assessments (typically standardized and correlated with summative assessments such as MCA-II) that are administered to all students 2-3 times per year. Results can be used to determine whether Tier 1 instruction is meeting the needs of most (80% recommended) students, as well as to identify early on which specific students are not on track to be proficient on summative assessments. Examples include AIMSweb probes and NWEA MAP tests.

Progress monitoring: A scientifically based practice used to assess students' academic performance on a regular basis and to evaluate the effectiveness of the instruction they are receiving. It can be implemented with individual students or an entire class. The information gathered through progress monitoring is used throughout the RtI/SRBI process to make important instructional decisions about the student. CBM is a scientifically validated means to carry out systematic progress monitoring.

Intervention integrity/fidelity: A process for monitoring the degree to which an intervention is implemented as planned, and corrections/adjustments are made as needed. Integrity of implementation can be checked by:

- Self report or log kept by the interventionist (review steps in the intervention, how often intervention will be done)
- Review of permanent products from the intervention (work samples, progress monitoring data, etc.)
- Direct observation of the intervention (i.e., number of observations, who will do the observations, observation notes)
- Rating scales or rubrics used to judge or summarize observations of implementation of the intervention (review steps in intervention, review intervention script, etc.)
- Students' actual attendance at intervention

Functional academic assessments: Student performance is assessed before intervention (at baseline) and then conditions are arranged to test the effect of certain intervention efforts on student learning. Typically, these test conditions include providing easier material, providing practice responding, and providing incentives for improved performance. If a condition improves student performance (e.g., providing incentives), then that condition is used for intervention (e.g., incentives are provided for improved performance until learning has improved). (rtinetwork.org)