

Response to Intervention

A Guide to Understanding and Implementation

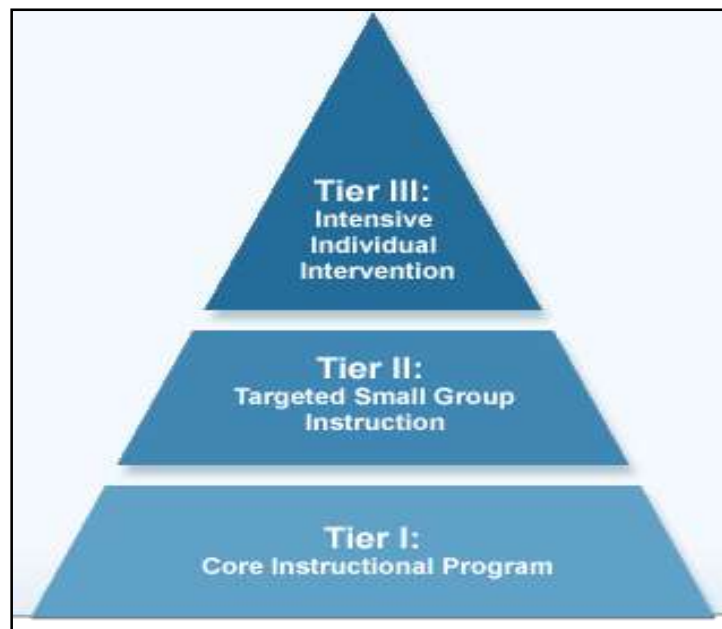


TABLE OF CONTENTS

WHAT IS Response to Intervention (RtI)?	Page 3
RtI IN BEMIDJI AREA SCHOOLS – FULL IMPLEMENTATION	Page 4
District RtI Team	Page 4
RtI Student Growth Teams	Page 4
Grade Level Building RtI Teams	Page 5
BEMIDJI AREA SCHOOLS’ RtI FLOW CHART	Page 6
STEP-BY-STEP RtI PROCESS IN A NUTSHELL	Page 7
ESSENTIAL FEATURES OF CORE INSTRUCTION	Page 8
ESSENTIAL FEATURES OF TARGETED INTERVENTION	Page 9
ESSENTIAL FEATURES OF INTENSIVE INTERVENTION	Page 10
WORKING WITH DATA	Page 11
PROGRESS MONITORING	Page 12-13
RtI IMPLEMENTATION – ACRONYMS AND JARGON	Page 14-16
RtI RESOURCES	Page 17
<u>APPENDIX</u>	Page 18
ROUTINE TASKS FOR THE RtI TEAMS	Page 19
RtI TEAM MEETING AGENDA AND NOTES	Page 20
READING SMART GOAL WORKSHEET	Page 21
MATH SMART GOAL WORKSHEET	Page 22
TAT PREP AND PRE-REFERRAL INTERVENTION FORM	Page 23-24
EVIDENCE-BASED PRACTICES/INTERVENTIONS IN READING	Page 25-29
EVIDENCE-BASED PRACTICES/INTERVENTIONS IN MATH	Page 30-32
EVIDENCE-BASED PRACTICES/INTERVENTIONS IN BEHAVIOR	Page 33
SAMPLE PARENT NOTIFICATION OF INTERVENTION	Page 34
DIAGNOSTIC EARLY LITERACY AND READING ASSESSMENTS	Page 35

What is Response to Intervention (RtI)?

Response to Intervention is a student support framework that:

- Creates an education system focusing on maximizing learning and creating success for *all* students.
- Provides high-quality, research-based academic instruction, behavioral support, and intervention matched to individual student needs.
- Supports early intervening services to help *prevent* academic, social-emotional, or behavioral difficulties and the need for special education services.
- Uses screening and progress monitoring data to inform decisions regarding groups' and individual students' educational programs.
- Is supported by federal and state laws such as the No Child Left Behind Act and the Individuals with Disabilities Education Improvement Act.

Most students will experience success with good, differentiated instruction in the classroom with no other programming support. Other students, however, may need additional time and support from their classroom teacher or programs like Title I, Assurance of Mastery (AOM), or Special Education in order to be successful. The goal of an RtI program is to diagnose a student's needs and provide the necessary intervention in a timely fashion so the student will succeed. Students, therefore, receive tiered support as follows:

Tier 3 - Individualized, Intensive Intervention – Ten Percent of Students or Less

Students receive intensive, strategic, and supplemental instruction specifically designed and customized to meet the student's needs. This instruction targets the student's specific skill deficits, social skill needs, or social/emotional problems, and is typically delivered in a very small group or 1:1 setting. Progress may be monitored even more frequently than in the targeted tier to determine the effectiveness of the intervention. Interventions may then be modified or changed based on the collected data.

Tier 2 - Targeted, Small Group Intervention – Ten to Fifteen Percent of Students

When there is converging evidence that students are not making adequate progress in the core curriculum, they are provided supplemental instruction and/or behavioral support in addition to the time allotted for core instruction. This targeted intervention includes instruction, strategies, and programs designed to supplement, enhance, and support core instruction. Interventions are typically delivered in small groups. Teachers monitor student progress frequently using general outcome measures and behavioral data.

Tier 1 - Core Classroom Instruction – All Students

In the core classroom, all students experience high-quality, differentiated, scientifically-based instruction and curriculum linked to state standards. Universal screening is conducted three times yearly to examine the effectiveness of overall instructional practices and to help identify students who may be at-risk for academic and behavioral difficulties.

RtI in Bemidji Area Schools – Full Implementation

A five-year RtI Implementation timeline was established during the 2010-2011 school year. At full implementation, the following RtI components will be in place:

- ☐ Staff will understand the RtI process and its benefits for students academically and behaviorally.
- ☐ A District RtI Team will exist to guide processes and consistency of implementation across multiple buildings. An RtI Specialist will work with the team to facilitate the process in each of the buildings.
- ☐ RtI School Student Growth Teams will exist at each school building to oversee the development of the RtI system at the school level. They will analyze data, provide RtI information to their colleagues, and help ensure the proper functioning of the RtI Grade-Level Teams.
- ☐ Instructional staff will be fully trained in district RtI procedures, including intervention implementation and progress monitoring.
- ☐ Grade-level building RtI Teams will meet regularly using a consistent problem-solving protocol. Teams will establish grade level, classroom, and student goals and work toward student growth as guided by assessment and observational data.
- ☐ A wide range of assessment data is utilized, from standardized instruments to formative assessments in the classroom. Assessments for screening, diagnosis, and progress monitoring purposes will be administered with fidelity and consistency across the district.
- Evidence-based (“best practice”), differentiated curriculum and instruction will be implemented at the classroom level.
- ☐ Math, Reading, and Behavioral interventions and strategies provided to students will be evidence-based and implemented with fidelity.
- ☐ Strategies for teaching gifted/talented students will be provided.
- ☐ Intervention data will be used to assist school Targeted Assistance Teams (TAT) and Child Study Teams (CST) in considering the appropriateness of special education placements for students.

District RtI Team

A team of administrators, school psychologists, special education personnel, the RtI Specialist, and a variety of other staff members in leadership positions meet on a bi-monthly basis to address district-level RtI concerns and make decisions regarding RtI implementation.

RtI Student Growth Teams

The Student Growth Teams are RtI leadership teams within their school buildings. A team generally consists of the principal, classroom grade level representatives, a Title I or AOM teacher, a special education teacher, and possibly an allied arts teacher. These teams meet with the building principal and the RtI Specialist once monthly (or more, if needed or requested by the principal). The teams’ key roles are to:

- Work with the principal and RtI Specialist to examine assessment data as it becomes available.
- Work with the principal and RtI Specialist to establish building reading, math, and behavioral goals, and communicate those goals with staff members. Ensure that building goals are aligned with district goals.

- Share handouts, strategies, and topics of discussion with RtI Team colleagues.
- Stay informed of reading, math, and behavioral goals developed by classrooms and/or grade levels in their RtI grade level teams. Help ensure that classroom/grade level goals are aligned with the building goals.
- Assist the principal and RtI Specialist with two building assessment data progress reviews, one in February and one in May. (Advise the agenda, help gather data, etc.)
- Meet with the RtI Specialist at least once monthly.
- Become knowledgeable in the intervention strategies suggested by the RtI Specialist. (The RtI Specialist will train the team in these strategies at monthly meetings.) Be willing to train staff members in intervention strategies and to assist staff members in the selection and implementation of the strategies as needed.
- Write and evaluate the building's School Improvement Plan.
- At the end of the school year, advise the principal and RtI Specialist of the needs of the building for the following year.

Grade-Level Building RtI Teams

A Building RtI Team generally consists of classroom teachers of the same or cross-grade levels, Title 1 or AOM teachers, and Special Education teachers (if available). Occasionally, an RtI Team may include allied arts specialists, such as teachers of music, art, physical education, or technology. These teams meet at least twice monthly, working collaboratively, to do the following:

- Establish grade level, classroom, and individual student goals
- Design and monitor intervention plans for a classroom, small groups, or individual students
- Decide when intervention plans should be modified
- Support each other in researching, exploring, and implementing powerful, evidence-based core instructional strategies and behavioral strategies
- Review benchmarking and other standardized data that has been collected
- Analyze student progress monitoring data
- Assist each other in the fidelity of the intervention implementation and assessment processes
- Determine when it may be appropriate to consult a Targeted Assistance Team (TAT) to address student needs
- Become informed regarding information from the Student Growth Team and the District RtI Team.

(See Appendix for RtI Team “Routine Tasks” handout, “Agenda and Notes Sheet”, and reading and math goal sheets.)

Bemidji Area Schools RtI/TAT/CST Process Flowchart

Ongoing: Implementing Best Practice for Core Instruction and Behavior/Management
Modify/Differentiate/Supplement – Use Whole Group and Small Group Instruction

RtI Level

Ongoing: Grade Level Assessments are Examined, Goals are developed, and Best Practices are Implemented and Evaluated...

AND

Ongoing: Struggling students and their progress are briefly and occasionally discussed. These students may be receiving Title I/AOM, MN Reading Corps, Indian Education, or classroom interventions. Intervention progress should be recorded (i.e. with AIMSweb PM Schedules).

Occasionally: A teacher may determine that a student is still struggling despite best efforts at this level. TAT should be consulted.

TAT Level

Complete TAT Preparation Form (up to dotted line)

Meet with TAT, who will review student data and determine the next steps, including the planning of two pre-referral interventions.

*Complete the Intervention 1 and 2 sections of the TAT Preparation Form.

*Notify Parents, and complete the "Parental Notification of Interventions" on the TAT Preparation Form.

After interventions have been completed, meet again with TAT and determine results.

*Complete the "Intervention Results" and "Group Decisions/Actions" sections of the TAT Preparation Form.

If interventions weren't effective, refer to CST.

CST Level

TAT prepares for a meeting with CST.

*With assistance from SE teacher, the TAT begins to complete the "Special Education Student Referral Review Form".

*A CST meeting is scheduled.

Review student data at CST meeting. Complete the Special Education Student Referral Review Form. Set up an evaluation planning meeting with parents if all agree.

Conduct special education evaluation.

Determine most appropriate programming for student, which may be special education services or continued general ed. interventions.

BEMIDJI AREA SCHOOLS - Intervention Process in a Nutshell

ONGOING: Implement Best Practices for Core Reading and Math Instruction and Behavior/Management - Modify/differentiate/supplement within regular classroom, using whole and small group instruction.

- Some students may additionally be receiving Title I/AOM, MN Reading Corps, Indian Education, or classroom interventions. Intervention records should be maintained using a record-keeping system of the interventionist's choice.
- RtI Teams will discuss grade level goals, assessments, and instruction. Implemented strategies and action plans are evaluated. RtI Teams will also discuss student progress—progress of the group as a whole and progress of students receiving interventions.
- If a student needs more assistance than can realistically be provided in the classroom with general education support, the referring teacher will complete the “TAT Preparation and Documented Pre-Referral Interventions” form **up to the dotted line on the form** and consult the TAT.

AT THE INITIAL TAT MEETING –

- The referring teacher will share information from the “TAT Preparation and Documented Pre-Referral Interventions” form with the TAT.
- The TAT will engage in a problem-solving discussion to determine a plan for addressing the student's needs. This may include:
 - Gathering more data or student information.
 - Completing diagnostic assessments (PAST, QPS, IRI, Sight Word Inventory, etc.).
 - Reviewing regular education interventions and their results.
 - Developing and implementing further intervention(s)* if needed – **Pre-referral Requirements: Two interventions are required for a pre-referral, and they may be conducted concurrently by any trained interventionist. Interventions should be conducted 4-5 days a week for at least 20 minutes per session in a 1:1 to 1:3 setting for at least 30 school days. For behavioral interventions, a behavioral skill or strategy should be taught, and the interventionist should have daily contact with the student. Documentation of parental notification must be provided.*
- The “Intervention 1” and “Intervention 2” sections of the “TAT Preparation and Documented Pre-Referral Interventions” form should be completed at this meeting.
- Parents should be notified immediately after the TAT meeting, and “Parent Notification of Intervention” section of the “TAT Preparation and Documented Pre-Referral Interventions” form should be completed.

WHILE THE PRE-REFERRAL INTERVENTION(S) IS/ARE BEING CONDUCTED –

- The interventionist monitors the student's progress at least twice monthly and maintains intervention records using a record-keeping system of choice.

AT A LATER TAT MEETING. WHEN THE INTERVENTIONS HAVE CONCLUDED (after at least 30 school days) -

- The TAT reviews intervention results, determines whether the interventions were successful, and considers the next steps for the student. If interventions were successful, the student returns to regular education programming with possible monitoring. If interventions were not successful, the TAT may decide to conduct further intervention(s) and reconvene again later to review results or refer the student's case to the CST.
- The “Intervention Results” and “Group Decisions/Actions” sections of the “TAT Preparation and Documented Pre-Referral Interventions” form should be completed at this meeting.

CST PREPARATION, IF STUDENT IS BEING REFERRED: With the assistance of the special education teacher, the referring teacher begins to complete the Special Education Student Referral Review Form and schedules a CST meeting.

AT THE CST MEETING: Student data is reviewed. The Special Education Student Referral Review Form is completed and an evaluation planning meeting is scheduled with parents if all agree.

ESSENTIAL FEATURES OF TIER 1 - CORE INSTRUCTION

Assessments

- ☐ Universal assessments of all students at least three times per year (benchmark data) to identify those students in need of intervention and to monitor the overall growth of groups of students and effectiveness of core curriculum
- ☐ Common formative and curricular assessments to guide and differentiate instruction
- ☐ Data to evaluate and monitor the effectiveness of the behavioral system (i.e. attendance rates, discipline referrals) and overall quality of school climate and social-emotional learning
- ☐ Additional assessments of certain individual students (i.e. checklists, observations, diagnostics) as warranted.

Curriculum

- An evidence-based curriculum, instruction, and organization in all content areas (English/Language Arts, Math, and Behavior) that have a high probability of bringing most students to an average to above average level of achievement (80% of student needs are met)
- Evidence-based, culturally responsive curricula that are likely to produce optimal levels of achievement.

Instruction

- Instruction appropriately differentiated within the core to meet the needs of a broad range of students
- Effective student engagement practices
- Homogeneous small group or individual interventions
- Explicit and systematic instruction targeting specific skill/content
- Research-based instruction that considers the following student factors: age, giftedness, cultural background, level of English language proficiency, mobility, socio-economic status, disability, etc. (See Appendix for list of evidence-based practices in reading, math, and behavior.)
- Curriculum delivered with fidelity.

Data Analysis and Decision Making – Grade Level RtI teams analyze various assessments, including common formative assessments, to improve and differentiate instruction in the grade level as a whole and identify individual students in need of academic or behavioral intervention.

Focus – General education core practices.

Interventions – Appropriate differentiation of instruction within the general education classroom (i.e. flexible small groups and appropriate instructional intervention materials, push-in services that support core instruction, appropriate modifications and accommodations, and language development)

Interventionist(s) – General education teachers with collaboration from school specialists and Grade Level RtI teams.

Setting – General education classrooms.

Time – At least 90 minutes of core instruction in reading; at least 60 minutes of core instruction in math; interventions at least 10 minutes long, 2-3 times a week.

ESSENTIAL FEATURES OF TIER 2 - TARGETED INTERVENTION

Assessments

- Frequent progress monitoring (i.e., weekly/bimonthly) using assessment tools that accurately target students' focus area(s) for improvement (i.e. MAP Skills systematic behavioral data in the area of social behavior)
- Additional assessments on individual students (i.e., observations, diagnostics) to help design the most effective intervention.

Curriculum

- Supplemental curriculum delivered outside of core classroom instruction and aligned with core curriculum that is designed to meet the needs of a targeted group of students
- Evidence-based curricular materials that have evidence of producing optimal levels of achievement
- Evidence-based behavioral and social/emotional lesson and strategy materials

Instruction

- Instruction involving homogeneous small group or individual instruction
- Explicit and systematic instruction targeting specific skill/content
- Effective student engagement practices
- Research-based instruction that considers the following student factors: age, giftedness, cultural background, level of English language proficiency, mobility, socio-economic status, disability, etc.
- Instruction aligned to the core but increasing in time and intensity depending on the needs of the student.

Data Analysis and Decision Making

Grade Level RtI Teams or TATs should match appropriate targeted interventions to students' needs, select appropriate progress monitoring tools, analyze progress monitoring data, modify or substitute new interventions, identify students not responding to intervention efforts (must have at least 3-4 data points to make decisions about effectiveness of interventions), conduct extensive analysis and application of data from interventions to document effectiveness, and help monitor fidelity of implementation of interventions.

Focus— Students failing to meet important academic benchmarks or social/behavioral expectations and who have not responded to Tier 1 supports and interventions.

Interventions

- Evidence-based interventions well-matched to students' specific academic, social-emotional, and/or behavioral needs and supplemental to the core program
- Interventions delivered with fidelity to individuals or homogeneous groups (i.e., students with similar needs) by a trained teacher or paraprofessional (suggested student ratio no more than 1:3)

Interventionist(s) - General education teachers, specialists, or other interventionists trained in accepted targeted interventions with collaboration from grade level RtI Teams or TATs

Parental Involvement— Parent notification of interventions occurs through letter, conference, or phone call. When applicable, parents need to be notified that these interventions could lead to special education referral. (See Appendix for sample letter.)

Setting- General Education classrooms or other general education locations within a school.

Time—Interventions may range from 10 minutes 2 days a week to 30 minutes or more 5 days a week. Amount of time will vary depending on time recommendations from research-based programs and interventions and on whether or not the student is in the pre-referral process for special education.

ESSENTIAL FEATURES OF TIER 3 - INTENSIVE INTERVENTION

Assessments

- Frequent progress monitoring (i.e., weekly) using assessment tools that accurately target students' focus area(s) for improvement (i.e. MAP Skills as well as systematic behavioral data in the area of social behavior).
- Additional assessments on individual students (i.e. observations, diagnostics) to help design the most personalized and effective intervention.

Curriculum

- Supplemental curriculum delivered outside of core classroom instruction and aligned with core curriculum that is designed to meet the needs of a very small group of students or an individual
- Evidence-based curricular materials that have evidence of producing optimal levels of achievement
- Evidence-based behavioral and social/emotional lesson and strategy materials

Instruction

- Most explicit, intensive instruction designed to meet unique learner needs
- Interventions delivered to individuals or homogenous small groups (no more than 3 students in a group)
- Narrowed instructional focus and increased time and intensity
- Systematic instruction targeting specific skill/content
- Research-based intervention that considers the following student factors: age, developmental level, giftedness, cultural background, level of English language proficiency, mobility, socio-economic status, disability, baseline data/starting level, area of deficit, etc.

Data Analysis And Decision Making – Grade Level RtI or TAT Teams choose, individualize, and intensify interventions for students receiving interventions; select appropriate progress monitoring tools; analyze progress monitoring data; modify or substitute new interventions as needed; identify students not responding to intensive intervention efforts; conduct extensive analysis and application of data from intensive interventions to document effectiveness of interventions; help monitor fidelity of implementation of interventions; and determine if or when consultation with CST is needed.

Focus – Students who are not meeting important academic benchmarks or social/behavioral expectations, and whose skills and/or behaviors are significantly discrepant from a standard or peer expectations (i.e., below the 10%ile); Students who were not successful with less-intensive, targeted interventions.

Interventions

- Evidence-based interventions well-matched to students' specific academic, social/behavioral needs and supplemental to the core program
- ☐ Interventions more intensive or individualized than targeted interventions
- ☐ Interventions delivered with fidelity to individuals or homogeneous groups (with a preferred student ratio of no higher than 1:3) by a teacher (preferably) or a well-trained paraprofessional

Interventionist(s) – Specialists or other well-trained interventionists

Parental Involvement – Parent notification of interventions occurs through letter, conference, or phone call. When applicable, parents need to be notified that these interventions could be leading to special education referral. (See Appendix for sample parent letter.)

Setting - General Education classrooms or other general education locations within a school.

Time – Preferably at least 10-30 minutes a day 4-5 days a week (depending on intervention and grade level).

WORKING WITH DATA

An integrated data collection/assessment system to inform decisions at each level of service delivery is essential in implementing an RtI system. Screening assessments, diagnostics, and progress monitoring assessments need to be implemented with fidelity in order to inform individual and systemic decisions. Examples of the data include but are not limited to:

Screening/Benchmark - Universal assessments that give a quick read on whether students have mastered critical skills or met normative “targets”, these measures provide general information on student skill and ability and how students compare to the norm. The purpose is to identify potential “at risk” students.

Examples in the Bemidji Area Schools include:

- NWEA MAP (Grades 2 and up) – standardized, computerized assessment that measures basic skills (reading, math, and language—if used) for all students 2-3 times a year
- Other – Teachers may wish to consider disciplinary referrals, attendance data, or other data as part of the screening process.

Diagnostic – These are individually administered assessments used to gain more in-depth information and guide appropriate instruction or intervention plans.

Examples in the Bemidji Area Schools include:

- Informal Assessments – provide information that can have a diagnostic value. These assessments can be teacher made or commercially produced. (See Appendix for a listing of Informal Diagnostics often used in the district.)
- Teacher/Parent/Student Ratings Scales or Interest Inventories – assist in the measurements of areas that are not easy to assess through the use of tests, such as attitude, behavior, or interests
- Classroom Work Samples – actual examples of student work such as writing assignments, projects, homework, curricular tests, etc. that can provide insight into specific student needs
- Classroom Observation – provides valuable information, not only on how the student responds to instruction; the effectiveness of the “match” between the curriculum/instruction and student learning; the student’s motor skills; and/or how the student reacts behaviorally, socially, or emotionally to direction, peer conflicts, social cues, etc.

Summative/Outcome Assessments - Provide an evaluation of the effectiveness of instruction and indicate student year-end achievement when compared to grade-level performance standards.

Examples in the Bemidji Area Schools include:

- State Assessments – provide valuable comparative data on a statewide or district level. While generally used to determine the effectiveness of instruction on a more broad-based level, these assessments are sometimes also used diagnostically.
- NWEA MAP – a standardized, computerized assessment that measures basic skills (reading, math, and language—if used) for all students 2-3 times a year
- Curriculum Assessments – Year-End evaluative assessments provided by district curriculum programs.

PROGRESS MONITORING

Progress Monitoring is a repeated measurement of academic and behavioral performance to inform instruction of individual students in general and special education. It is conducted regularly to (a) estimate rates of improvement, (b) identify students who are not demonstrating adequate progress, (c) establish individual instructional goals for students in need, and/or (d) design more effective, individualized instruction/intervention.

- Behavioral Data –collected on specific targeted behaviors over time (rate, frequency, etc.).

Progress Monitoring In the Core and in Interventions

Tier 1 - Core: Use data that is gathered three times a year to assess the student responses to core instruction and identify students who require more intensive intervention. If intervening with students within core instruction, a teacher may wish to progress monitoring monthly to determine intervention effectiveness.

Tier 2 - Targeted Interventions: Use data to determine whether sufficient response is occurring during supplemental instruction and determine when a student is ready to transition to less or more intensive intervention.

Tier 3 - Intensive Interventions: Use data to determine whether sufficient response is occurring during intensive intervention, and determine when a student is ready to transition to less or more intensive intervention or whether a special education referral may be appropriate.

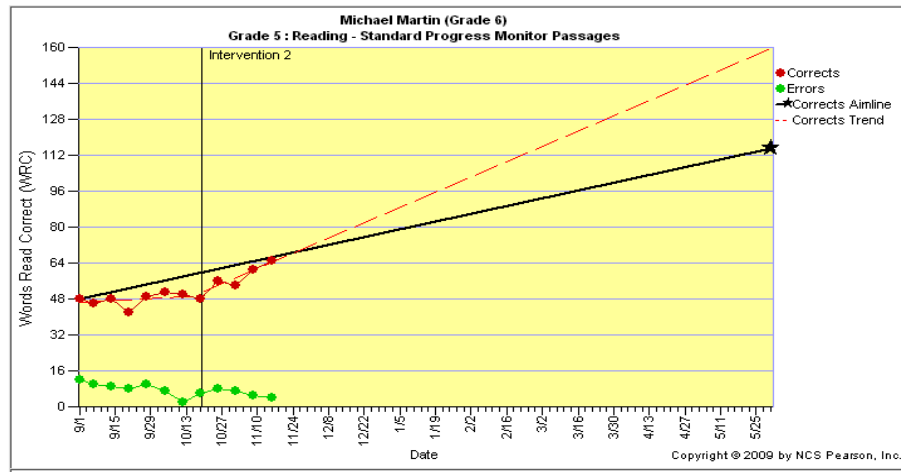
How Progress Monitoring Works

- The student's current level of performance is determined and goals are identified for learning to take place over time.
- The student's academic/behavioral performance is measured on a regular basis (weekly/monthly).
- Progress toward meeting the student's goal is measured comparing expected and actual rates of learning.
- Data is analyzed regularly in RtI or TAT Teams in order to modify instruction as needed.

Steps for Implementation:

1. Select appropriate assessment(s) for student's grade and skill level.
2. Set goal(s).
3. Administer and score the assessment(s) at regular intervals (weekly, bi-weekly, or monthly). Graph scores
4. Assess the progress report graph of the student to determine if adequate progress is being made.
5. Make instructional decisions within the RtI or TAT Team based on the progress monitoring data.
6. Communicate progress with the student, parents, and other educational professionals.

EXAMPLE 1: Individual Student Progress Monitoring Graph



Goal Setting

Goal Setting involves determining an academic benchmark that an individual student should attain by a certain period of time. Assessing student performance involves reviewing an individual students' progress monitoring graph and evaluating his/her performance in relationship to an established goal.

RtI Implementation – Acronyms and Jargon

Acronym or Term	Meaning
Assessment	The process of measuring and documenting what students have learned.
Baseline Data	Basic information on a student's current performance level, which is gathered before a program or intervention begins. It is the starting point used to compare a student's learning before a program or instruction begins.
Benchmark (or Universal)	An assessment screening to identify at-risk students in academics and behavior, completed 3 times a year in the district to track all students' performance throughout the year.
Core Instruction	Instruction in the classroom that all students receive (e.g. reading, math, science, social studies)
CST	Child Study Team – A group comprised of a student's classroom teacher, special education teachers, an administrator, a school psychologist, and the student's parents (and other personnel as deemed appropriate) who, after a TAT has tried interventions, collected data, and has run out of regular education options: (1) review existing data on a student including the documented interventions record, (2) complete special education student referral review and (3) if appropriate complete special education evaluation plan.
Data-Based Decision	The use of student data to guide the design, implementation, and adjustment of instruction.
Differentiated Instruction	An approach to teaching and learning that gives students multiple options for taking in information and making sense of ideas, involving many techniques such as small group learning, cooperative learning, alternative teaching strategies, student choice, hands-on methods, etc.
Explicit Instruction	Instruction that is clear, deliberate, and visible.
Fidelity	Using a program or method of instruction as it was intended to be used.
Five "Big Ideas" of Reading Instruction	Critical areas of reading for all tiers of the Response to Intervention Framework, including Phonemic Awareness, Phonics, Fluency, Vocabulary, and Comprehension.
Flexible Grouping	The ability for students to move among different student groups for instruction based on their performance and instructional needs.
Intervention	An instructional strategy or tool meant to address a student need and accelerate performance in academics and behavior.
Progress Monitoring	Student assessment that occurs as often as one or two times per week or as little as once monthly using MAP Skills or other probes, usually completed with students whose scores are highly discrepant from the norm and who are receiving a small group or individualized intervention. Progress monitoring is completed to inform instruction and let the teacher know how an intervention is working.

Acronym or Term	Meaning
Progress Monitoring Probes (or just “Probes”)	Brief assessments in academics and behavior similar to benchmark assessments but completed more often, usually used with students who are receiving an intervention. The probe is a tool meant to inform the teacher of student progress and whether or not an intervention is working.
RtI	Response to Intervention – a general education framework or philosophy using a multi-tiered approach to instruction in order to best meet all students’ needs in academics and behavior.
RtI Team	RtI Team - a group of grade level classroom and Title I/AOM educators meeting in small groups to examine assessment data and student work to set instructional goals and assist each other in meeting student needs/planning interventions.
State Standards	What students in Minnesota should know and be able to do at each grade level. Your child’s standards are available at: http://education.state.mn.us/MDE/EdExc/StanCurri/K-12AcademicStandards/index.htm
Student Growth Team	A team in each school primarily responsible for the building’s data analysis, goal setting, evaluating the building’s academic progress, and providing teachers with assistance in using MAP Skills and evidence-based interventions.
TAT	Targeted Assistance Team – A group comprised of a student’s classroom teacher, an administrator, assigned grade level representatives, (and other personnel as deemed appropriate) serving as a resource for a teacher who desires assistance in applying a problem solving approach to develop more intensive and individualized intervention planning in dealing with a student’s academic or behavioral needs that have not responded to targeted supplemental instruction.
Tier 1 (Core)	Classroom or core instruction, including differentiated practices, where it is hoped that 75 – 85% of students will achieve within an average range without supplemental supports.
Tier 2 (Targeted Intervention)	Supplemental instruction or intervention for students somewhat at risk in academics and/or behavior; an additional “scoop” of instruction besides what the student receives in Tier 1, usually involving small group strategies and more instructional time in a focus area.
Tier 3 (Intensive Intervention)	Intensive instruction or intervention for students severely at risk in academics and/or behavior; may involve more daily time for (an) intervention(s), more intensity (smaller group or individualized), and a longer duration than in Tier 2.

RtI Resources

For more information about RtI, contact one of the following district personnel:

Gigi Nicoson, District Language Arts/Social
Studies/RtI Specialist (218) 333-3290 (x43247)
brigitta_nicoson@isd31.net

Amanda Mix, District Math/Science/RtI
Specialist (218) 333-3250 (x44214)
Amanda_Mix@isd31.net

Kathy Palm, Director of Curriculum and
Administrative Services (218) 333-3100 (x31103)
kathy_palm@isd31.net

Stephanie Hubbard, Director of Special
Education (218) 333-3100 (x31104)
Stephanie_Hubbard@isd31.net

You can also find information about RtI and interventions on the following websites:

Bemidji Area Schools' website/RtI link (under "Curriculum"):
<http://www.bemidji.k12.mn.us>

St. Croix River Education District/Minnesota RtI Center:
http://www.scred.k12.mn.us/rt_i/minnesota_rti_center

RTI Action Network:
<http://www.rtinetwork.org>

National Center on Response to Intervention:
<http://www.rti4success.org>

National Center on Student Progress Monitoring:
<http://www.studentprogress.org>

National Association of State Directors of Special Education:
<http://www.nasdse.org>

Positive Behavioral Interventions & Supports:
<http://www.pbis.org>

U.S. Department of Education's What Works Clearinghouse:
<http://www.ies.ed.gov/ncee/wwc/>

To develop worksheets, activities, or recording sheets for interventions, go to:

Intervention Central: <http://www.interventioncentral.org>

Math Aids: <http://www.math-aids.com>

Math Drills: <http://www.math-drills.com>

Ed Helper: <http://www.edhelper.com>

EasyCBM: <http://www.easycbm.com>

Appendix

Routine Tasks for the Rtl Teams

1. Greet everyone! ☺
2. Take out an “Agenda and Notes” sheet. Date it.
3. Choose roles. Write names on the sheet by the role listings.
4. Begin your discussion:
 - a. Briefly review your goal(s) and what you discussed last time.
 - b. **Brief Discussion about Individual Students** – Do any or all of following:
 - i. Discuss the progress monitoring data/graphs of the students in intervention. Decide if you need to continue the current intervention, change the intervention, or dismiss the student from the intervention. Refrain from intensive, lengthy discussion about individual students. If this is needed, please consult the TAT.
 - ii. Discuss students who aren’t receiving an intervention but may need one. Develop an intervention plan, if desired; and/or,
 - iii. Engage in a brief problem-solving discussion regarding an individual student, if needed. (Note: Be sure to record any intervention changes.)
 - c. **Discussion about Core Instruction** –
 - i. Review the core strategy everyone said they would try related to your goal. Have everyone share what s/he tried and how it went, sharing evidence (student work, unit tests, assessments, progress monitoring if applicable, etc.). If something is not going well, brainstorm solutions together. Do you need to keep trying the same strategy, but revise it? Or do you need to try something different? Write notes.
 - ii. Discuss a core strategy that everyone should try for next time, using ideas from your goal sheet. Write notes. If you didn’t get to discuss all your intervention students at this meeting, make notes of which students should be discussed next time.
5. The note taker should make copies of the notes for everyone and put them in team members’ mailboxes, and give a copy to the principal.

RtI “High Performing Team” Meeting Agenda & Notes

Date:	
Facilitator:	
Timekeeper:	
Recorder:	
Other Role:	

Estimated Time	Topic/Agenda Item	Outcome
2 min.	Check-in and Review Goals	(List members present. Review notes from previous meeting and indicate any changes to the agenda below.)
12 min.	Discussion of Individual Students	[List students discussed and a brief summary of what was decided (i.e. student progress, maintain intervention, change intervention, problem-solving results, etc.)]
12 min.	Discuss Tier I/Core Strategies to Support Goal	
4 min.	Discussion of Tasks for Next Meeting (which student to discuss, what to try, what to complete...)	(List items or students to discuss at next meeting and any tasks or “assignments” due at that time.)

**When your meeting is finished, please make a copy of these notes and give them to your building principal.
Thank you!**

Reading SMART Goal Worksheet:

School:

Grade:

Team Members:

District Goal Related to Team SMART Goal:

School Goal Related to Team SMART Goal:

Grade Level "Reading Well by Grade 3" Plan Goals:

Grade Level Goal(s):

Current Reality/Data Causing the SMART Goal to be Written:

Team SMART Goal	Strategies and Action Steps	Who is Responsible?	Target Date or Timeline	Evidence of Effectiveness/Assessment

Reading SMART Goal Worksheet:				
Math SMART Goal Worksheet:				
School: Grade: Team Members: District Goal Related to Team SMART Goal: School Goal Related to Team SMART Goal: Grade Level Goal(s): Current Reality/Data Causing the SMART Goal to be Written:				
Team SMART Goal	Strategies and Action Steps	Who is Responsible?	Target Date or Timeline	Evidence of Effectiveness/Assessment



Bemidji Area Schools
ISD #31
Bemidji, MN 56601

**TAT Preparation and (1/16)
Documented Pre-Referral Interventions**

Complete all sections up to the dotted line PRIOR to the TAT Meeting.

Teacher/Referring Person:		Date:
Student's Name:	School:	DOB:
Grade:	Parent/Guardian:	
Address:		Phone:

Race: If Native American, Indian Education Notified: ☐ Yes ☐ No

Student History Review – Check if “yes” and attach additional information or describe as needed.

- History of absenteeism? ☐ Yes ☐ No Describe: _____
- History of retention? ☐ Yes ☐ No Describe: _____
- History of behavioral concerns? ☐ Yes ☐ No Describe: _____
- Physical, health, or medical problems or concerns? ☐ Yes ☐ No Describe: _____
 - Vision Screening conducted in last 6 months? ☐ Yes ☐ No Describe date and results: _____
 - Hearing Screening conducted in last 6 months? ☐ Yes ☐ No Describe date and results: _____
- Environmental, diversity, or family factors affecting education? ☐ Yes ☐ No Describe: _____
- Outside agency evaluation? ☐ Yes ☐ No Describe: _____
- Previous special education assessments? ☐ Yes ☐ No Describe: _____
- Previous special education services? ☐ Yes ☐ No Describe: _____
- Previous Title I/Assurance of Mastery or other services? ☐ Yes ☐ No Describe as specifically as possible, listing previous interventions and/or accommodations if known (Reading Recovery, LLI, etc.): _____

Initial Parent/Guardian Contact – Complete before meeting with the TAT.

Date Parent/Guardian Contacted:	Person Making Contact:
Type of Contact: ☐ Phone Call ☐ Conference/Face-to-Face Visit	
Cultural Interview (ask the parent/guardian the following and record responses): All Languages Spoken in the Home: _____ Child's First Language of Exposure: _____ (If Native American) “Which best describes your connection to the district's Indian Education program?” ☐ We are registered. ☐ We have declined services. ☐ We are interested in more information. Please ask parent/guardian the following question: “As you think about your family's cultural or racial background, would you like the school staff to know anything specific about your child?” Parent/Guardian Response: _____ If vision and hearing screenings have not been conducted within 6 months, inform parent/guardian that the screenings will be conducted. Parent was informed of vision/hearing screenings: ☐ Yes ☐ Not necessary; screening has been done within past 6 months (If necessary, inform school health professional that screenings need to be completed.)	

Attach any previous progress monitoring graphs or intervention records less than a year old, if available.

Relevant Assessment Data (MCA, MAP, AIMSweb, Curricular, Other):

Describe area(s) of concern or problem behavior. What do the interventions need to address?

Complete the rest of the form at the TAT Meeting(s).

Note: Pre-referral Intervention Requirements: Academic interventions should be conducted 4-5 days a week for at least 20 minutes per session in a 1:1 to 1:3 setting for at least 30 school days. Two interventions must be completed. For behavioral interventions, a behavioral skill or strategy should be taught, and the interventionist should have daily contact with the student. Documentation of parental notification must be provided. **Note: Set up a Progress Monitoring Schedule on AIMSweb and document the intervention there, if possible. If not using AIMSweb as a progress monitoring system, use an alternative documentation system that will demonstrate student progress. The Interventionist must have a fidelity self-check on file for these interventions.**

Intervention 1.

Choose and describe an intervention that addresses area/behavior of concern.

Dates: _____ to: _____

Baseline **Data** of the skill/problem behavior (including relevant assessment scores):

Which intervention are you using?

Intervention Plan (frequency, setting, progress monitoring procedures/tool):

Person Responsible:

Intervention 2.

Choose and describe an intervention that addresses area/behavior of concern.

Dates: _____ to: _____

Baseline **Data** of the skill/problem behavior (including relevant assessment scores):

Which intervention are you using?

Intervention Plan (frequency, setting, progress monitoring procedures/tool):

Person Responsible:

Parental Notification of Intervention – Complete after intervention(s) is/are planned.

Date Parent Contacted:	
Type of Contact:	☐ Phone Call ☐ Letter/Note/Email ☐ Home Visit ☐ Conference/Face-to-Face Visit
Person Making Contact:	Information/Comments from Parent:

Intervention Results - include measurable outcome data (assessments, etc.); attach AIMSweb progress monitoring graphs or other record-keeping data):

Measurable Outcome **Data** for Intervention #1:

Measurable Outcome **Data** for Intervention #2:

Narrative of Results (both interventions):

Group Decisions/Action

Date: _____

- ☐ Intervention was effective. No referral needed. Place all documentation in cumulative file.
- ☐ Intervention appears effective. Continue and review progress on _____ (date).
- ☐ Modify current intervention. Indicate modifications above and on AIMSweb or in interventionist's record-keeping system. Review on _____ (date).
- ☐ Try a different intervention. Complete a new TAT Intervention Plan and attach to this document. Review on _____ (date).
- ☐ Refer student to CST. Place a copy of this intervention information in the student's cumulative folder. Keep these originals and attach to the CST procedural paperwork.

Notes:

BEMIDJI AREA SCHOOLS

Evidence-Based Core and Intervention Practices in Reading

The practices on this list are likely, because of research support, to have a positive effect for struggling students than practices with no supportive evidence. This list is not exhaustive. If a practice is not found on this list, the reasons could be several: 1) It's not used in the district's schools; 2) It is used but was not found to have solid evidence; or 3) Time did not permit an exhaustive search for all evidence-based practices. All of the practices below, whether verified by research using control studies or found "promising" by the Florida Center for Reading Research or the What Works Clearinghouse, are included because they are closely tied to areas of the National Reading Panel found to be necessary for literacy success—phonemic awareness, phonics, fluency, vocabulary, and comprehension. (Note: Portions of the list below are based on the work completed at the Rtl Center, St. Croix Regional Education District.)

Evidence-Based Practice	Instructional Area for which the practice is intended:	Grade Level(s) for which the practice is intended:	Evidence Base	Alignment to ELA Curriculum Objectives and Standards
Guided Reading	Phonemic Awareness, Phonics, Fluency, Vocabulary, Comprehension	K - 6	Iaquinta, 2006; Fountas, I. & Pinnell, G., 1996, 2008; Smith, C., 2003	Grades K - 5 (all Literature, Informational Text, Foundational Skills, and Language Benchmarks; and Speaking, Viewing, Listening and Media Literacy Benchmarks 1 through 6), K.6.3.3., 1.6.3.3., 2.6.3.3., and 3.6.3.3.
Reading Recovery	Phonemic Awareness, Phonics, Fluency, Vocabulary, Comprehension	1	What Works Clearinghouse: http://ies.ed.gov/ncee/wwc/InterventionReport.aspx?sid=420	Grade 1 (all Literature, Informational Text, Foundational Skills, and Language Benchmarks; and Speaking, Viewing, Listening and Media Literacy Benchmarks 1 through 6), 1.6.3.3.
Leveled Literacy Intervention	Phonemic Awareness, Phonics, Fluency, Vocabulary, Comprehension	K - 2	http://www.heinemann.com/fountasandpinnell/research/LLIResearchBase.pdf	Grades K, 1, 2, and 3 (all Literature, Informational Text, Foundational Skills, and Language Benchmarks; and Speaking, Viewing, Listening and Media Literacy Benchmarks 1 through 6), K.6.3.3., 1.6.3.3., 2.6.3.3., and 3.6.3.3.
Peer-Assisted Learning Strategies (PALS)	Phonemic Awareness, Alphabetic Principle, Fluency, Comprehension	K-6	Allor, J.H., Fuchs, D. & Mathes, P. (2001); Barton-Arwood, S.M., Wehby, J.M., & Falk, K.B. (2005); Fuchs, D., & Fuchs, L.S. (1998); Fuchs, D., Fuchs, L.S., & Burish, P. (2000); Fuchs, D., Fuchs, L.S., Mathes, P.G., & Martinez, E. (2002)	K.3.0.1., K.3.0.2., 1.3.0.2., K.3.0.3., 1.3.0.3., 2.3.0.3., 1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.
Paired Reading	Fluency	1 - 6	Delquadri et.al., 1986; Mathes & Fuchs, 1993; Mathes, et.al, 1994	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.
Reciprocal Teaching	Comprehension	1 - 12	Palincsar & Brown, 1984; Johnson-	2.1.1.1., 2.1.2.2., 2.1.10.10., 2.2.1.1.,

			Glenberg, M.C.,2000; Lysynchuk, L.M., Pressley, M., & Vye, N.J.,1990	2.2.2.2., 2.2.10.10., 3.1.1.1., 3.1.2.2., 3.1.10.10., 3.2.1.1., 3.2.2.2., 3.2.10.10.,4.1.1.1., 4.1.2.2., 4.1.10.10., 4.2.1.1., 4.2.2.2., 4.2.10.10., 5.1.1.1., 5.1.2.2., 5.1.10.10., 5.2.1.1., 5.2.2.2., 5.2.10.10.
Repeated Reading	Fluency	1 - 12	Moyer, S.B., 1982; Rasinski, T.V.; 1990; Rashotte, C.A., & Torgeson, J.K., 1985; Samuels, S. J., 1979; Samuels, S. J. (1987); Sindelar, P.T., Monda, L.E., & O'Shea, L.J., 1990; Therrien, W.J., 2004	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.
Early Reading Intervention	Phonemic Awareness, Phonics, Fluency, Vocabulary	K - 1	Simmons, D.C., Kame'enui, E.J., Harn, B.A., Edwards, L.L., & Coyne, M.D., 2001.	K.3.0.1., K.3.0.2., 1.3.0.2., K.3.0.3., 1.3.0.3., 2.3.0.3.
(Marzano) Building Academic Vocabulary	Vocabulary	K - 12	Marzano, R., 2006; Irwin, J., 2008	1.10.4.4., 1.10.5.5., 1.10.6.6., 2.10.4.4., 2.10.5.5., 2.10.6.6., 3.10.4.4., 3.10.5.5., 3.10.6.6., 4.10.4.4., 4.10.5.5., 4.10.6.6., 5.10.4.4., 5.10.5.5., 5.10.6.6.
Read Naturally	Fluency	K - 12	http://www.fcrr.org/FCRRReports/PDF/ReadNaturally.pdf ; http://oregonreadingfirst.uoregon.edu/downloads/instruction/curriculum_review/si_reviews/read_naturally.pdf	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.
Choral Reading	Fluency	K - 5	Rasinski, Padak, Linek, & Sturtevant,1994	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.
Echo Reading	Fluency	K - 5	Mathes, P.G., Torgesen, J.K., & Allor, J.H., 2001	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.
Elkonin (Sound) Boxes	Phonemic Awareness, Phonics	K - 1	Clay, M.M., 1993; Griffith, P.L. & Olson, M.W.,1992; Joseph, L.M 2000	K.3.0.2., 1.3.0.2.
Letter/Sound Correspondence – Explicit Phonics Instruction	Phonics	K - 1	Adams, M.J., 1990; Adams, M.J., 2001; Chard, D.J., & Osborn, J., 1999	K.3.0.3.
Making Words	Phonics	K - 12	Wylie, R & Durrell, D., 1970; Johnston, Bear, Invernizzi, & Templeton, 2002; Treiman, R., 1985	K.3.0.3.
Phoneme Blending	Phonemic Awareness	K - 1	Adams, M.J., 1990; Bos, C.D., & Vaughn, S., 2002; Ehri, L.C., Nunees, S.R., & Willows, D.M., 2001; Santi, K.L., Menchetti, B.M., & Edwards, B.J., 2004; Smith, C.R., 1998; Smith, S.B., Simmons, D.C., & Kame'enui, E, J., 1998; Snider, V. E., 1995	K.3.0.2., 1.3.0.2.

Phoneme Segmentation	Phonemic Awareness	K - 1	Adams, M.J., 1990; Bos, C.D., & Vaughn, S., 2002; Ehri, L.C., Nunees, S.R., & Willows, D.M., 2001; Santi, K.L., Menchetti, B.M., & Edwards, B.J., 2004; Smith, C.R., 1998; Smith, S.B., Simmons, D.C., & Kame'enui, E, J., 1998; Snider, V. E., 1995	K.3.0.2., 1.3.0.2.
Think-Pair-Share	Comprehension	1 - 12	Millis, B.J. & Cottell, P.G., Jr., 1998	2.1.1.1., 2.1.2.2., 2.1.10.10., 2.2.1.1., 2.2.2.2., 2.2.10.10., 3.1.1.1., 3.1.2.2., 3.1.10.10., 3.2.1.1., 3.2.2.2., 3.2.10.10., 4.1.1.1., 4.1.2.2., 4.1.10.10., 4.2.1.1., 4.2.2.2., 4.2.10.10., 5.1.1.1., 5.1.2.2., 5.1.10.10., 5.2.1.1., 5.2.2.2., 5.2.10.10.
Word Sorts	Phonics, Vocabulary	Pre K - 12	Joseph, L., 2002	K.3.0.3., 1.10.4.4., 1.10.5.5., 1.10.6.6., 2.10.4.4., 2.10.5.5., 2.10.6.6., 3.10.4.4., 3.10.5.5., 3.10.6.6., 4.10.4.4., 4.10.5.5., 4.10.6.6., 5.10.4.4., 5.10.5.5., 5.10.6.6.
Four Square Vocabulary	Vocabulary	1 - 12	Fraye, D., Frederick, W., & Klausmeier, H., 1969	1.10.4.4., 1.10.5.5., 1.10.6.6., 2.10.4.4., 2.10.5.5., 2.10.6.6., 3.10.4.4., 3.10.5.5., 3.10.6.6., 4.10.4.4., 4.10.5.5., 4.10.6.6., 5.10.4.4., 5.10.5.5., 5.10.6.6.
Read-Cover-Remember-Retell	Comprehension	1 – 12	Hoyt, L., 1999, 2002	2.1.1.1., 2.1.2.2., 2.1.10.10., 2.2.1.1., 2.2.2.2., 2.2.10.10., 3.1.1.1., 3.1.2.2., 3.1.10.10., 3.2.1.1., 3.2.2.2., 3.2.10.10., 4.1.1.1., 4.1.2.2., 4.1.10.10., 4.2.1.1., 4.2.2.2., 4.2.10.10., 5.1.1.1., 5.1.2.2., 5.1.10.10., 5.2.1.1., 5.2.2.2., 5.2.10.10.
Click or Clunk!	Comprehension	1 - 12	Anderson, T., 1980; Babbs, P., 1984; Vaughn, S., et al, 2001	2.1.1.1., 2.1.2.2., 2.1.10.10., 2.2.1.1., 2.2.2.2., 2.2.10.10., 3.1.1.1., 3.1.2.2., 3.1.10.10., 3.2.1.1., 3.2.2.2., 3.2.10.10., 4.1.1.1., 4.1.2.2., 4.1.10.10., 4.2.1.1., 4.2.2.2., 4.2.10.10., 5.1.1.1., 5.1.2.2., 5.1.10.10., 5.2.1.1., 5.2.2.2., 5.2.10.10.
Pre-teaching	All	K-12	V. Urquhart, 2008; Lemov, D., 2010	Any standards to which aligned skills are pre-taught

Minnesota Reading Corps Interventions

Minnesota Reading Corps tutors are trained in and use the following evidence-based interventions in their work with K – 3 students in Bemidji Area Schools.

Evidence-Based Practice	Reading Instructional Area for which the practice is intended:	Grade Level(s) for which the practice is intended:	Evidence Base	MN State ELA Standards Alignment
Say It and Move It	Phonemic Awareness	K	Ball, E.W., & Blachman, B.A., 1991	K.3.0.2., 1.3.0.2.
Newscaster	Fluency	1 - 5	Armbruster, B.B., Lehr, F., & Osborn, J., 2001; Rasinski, T.V., 2003; Stahl S., 2004	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.
Pencil Tap	Fluency	1 - 5	Hattie, J., & Timperley, H., 2007; Howell, K., W., & Nolet. V., 2000;	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.
Stop/Go	Fluency, Comprehension	1 - 5	Blevins, W., 2001; Rasinski, T.V., 2003	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4., 2.1.1.1., 2.1.2.2., 2.1.10.10., 2.2.1.1., 2.2.2.2., 2.2.10.10., 3.1.1.1., 3.1.2.2., 3.1.10.10., 3.2.1.1., 3.2.2.2., 3.2.10.10., 4.1.1.1., 4.1.2.2., 4.1.10.10., 4.2.1.1., 4.2.2.2., 4.2.10.10., 5.1.1.1., 5.1.2.2., 5.1.10.10., 5.2.1.1., 5.2.2.2., 5.2.10.10.
Phoneme Blending	Phonemic Awareness	K - 1	Adams, M.J., 1990; Bos, C.D., & Vaughn, S., 2002; Ehri, L.C., Nunees, S.R., & Willows, D.M., 2001; Santi, K.L., Menchetti, B.M., & Edwards, B.J., 2004; Smith, C.R., 1998; Smith, S.B., Simmons, D.C., & Kame'enui, E, J., 1998; Snider, V. E., 1995	K.3.0.2., 1.3.0.2.
Phoneme Segmenting	Phonemic Awareness	K - 1	Adams, M.J., 1990; Bos, C.D., & Vaughn, S., 2002; Ehri, L.C., Nunees, S.R., & Willows, D.M., 2001; Santi, K.L., Menchetti, B.M., & Edwards, B.J., 2004; Smith, C.R., 1998; Smith, S.B., Simmons, D.C., & Kame'enui, E, J., 1998; Snider, V. E., 1995	K.3.0.2., 1.3.0.2.
Letter Sound Correspondence	Phonics	K - 1	Adams, M.J., 1990; Adams, M.J., 2001; Chard, D.J., & Osborn, J., 1999	K.3.0.3., 1.3.0.3.
Blending Words	Phonemic	K-1	Lewkowicz, 1980; Lundberg et al., 1988;	K.3.0.2., 1.3.0.2.

	Awareness; Phonics		Wagner, Torgeson, Laughon, Simmons, & Bashotte, 1993; Yopp, H., 1988	
Duet Reading	Fluency	1 - 12	Heckelman, 1969; Flood, et al, 2009	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.
Repeated Reading with Comprehension Strategy	Fluency	1 - 12	Moyer, S.B., 1982; Rasinski, T.V.; 1990; Rashotte, C.A., & Torgeson, J.K., 1985; Samuels, S. J., 1979; Samuels, S. J. (1987); Sindelar, P.T., Monda, L.E., & O'Shea, L.J., 1990; Therrien, W.J., 2004	1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4., 2.1.1.1., 2.1.2.2., 2.1.10.10., 2.2.1.1., 2.2.2.2., 2.2.10.10., 3.1.1.1., 3.1.2.2., 3.1.10.10., 3.2.1.1., 3.2.2.2., 3.2.10.10., 4.1.1.1., 4.1.2.2., 4.1.10.10., 4.2.1.1., 4.2.2.2., 4.2.10.10., 5.1.1.1., 5.1.2.2., 5.1.10.10., 5.2.1.1., 5.2.2.2., 5.2.10.10.
Great Leaps	Phonics, Sight Words, Fluency	K - 12	Mercer, C., Campbell, K., Miller, W., Mercer, K., & Lane, H., 2000; http://www.fcrr.org/fcrrreports/PDF/GreatLeapsReport.pdf	K.3.0.3., 1.3.0.3., 1.3.0.4., 2.3.0.4., 3.3.0.4., 4.3.0.4., 5.3.0.4.

BEMIDJI AREA SCHOOLS

Evidence-Based Core and Intervention Practices in Math

Following are the effective and promising practices most prevalent in the research surrounding math instruction:

1. Use Direct, Explicit Systematic Instruction
 1. Establish Purpose
 2. Model and Demonstrate
 3. Provide Guided Practice
 4. Provide Independent Practice
2. Teach Problem Solving Strategies (Word Problems and Computation)
3. Pre-Teach or Re-Teach in a Small Group (Use of games is effective.)
4. Provide Self-Monitoring and Self-Correcting Opportunities
5. Provide Peer Tutoring Opportunities
6. Have students use Drawings and Visual Representations to Solve Problems
7. Have Students Use Manipulatives to Solve Problems
8. Provide Practice in the Fluent Retrieval of Math Facts.

Bemidji Area Schools' Math Intervention list is provided below:

BEMIDJI AREA SCHOOLS - Math Intervention Strategies

Intervention Information							
Name of Intervention	Grade Level	Entrance Criteria: Implement if Student has not reached Benchmark or at least the 25th percentile	Frequency	Length of Session	Progress Monitoring Probe	Exit Criteria: Discontinue Implementation when student reaches Benchmark or at least the 25th percentile on:	MN State Math Standards Alignment
Oral Counting	K and 1	OCM	At least 3 times per week	At least 10 minutes	AIMSweb OCM	OCM	0.1.1.3., 1.1.1.3.
Number Identification Flashcard Procedure	K and 1	NIM	At least 3 times per week	At least 10 minutes	AIMSweb NIM	NIM	0.1.1.2., 1.1.1.2.

Name of Intervention	Grade Level	Entrance Criteria: Implement if Student has not reached Benchmark or at least the 25th percentile on:	Frequency	Length of Session	Progress Monitoring Probe	Exit Criteria: Discontinue Implementation when student reaches Benchmark or at least the 25th percentile on:	MN State ELA Standards Alignment
Re-Teaching Using Math Games	K+	Any Early Numeracy, M-COMP, or M-CAP probe	At least 3 times per week	At least 15 minutes	Any Early Numeracy, M-COMP, or M-CAP	Any Early Numeracy, M-COMP, or M-CAP probe	Any standard with a related game as selected by the interventionist
Cover, Copy, Compare	1+	M-COMP, or those who are not fluent with basic or complex computation	At least 3 times per week	At least 10 minutes	AIMSweb M-COMP	M-COMP	1.1.2.1., 1.1.2.2., 1.1.2.3., 1.2.2.1., 1.2.2.2., 1.2.2.3., 2.1.2.1., 2.1.2.2., 2.1.2.4., 2.1.2.5., 3.1.2.1., 3.1.2.2., 3.1.2.3., 3.1.2.5., 4.1.2.1., 4.1.2.2., 4.1.2.5., 5.1.1.1., 5.1.1.4., 5.1.3.1., 5.1.3.2., 5.1.3.4.
Flashcard Procedure	1+	M-COMP, or those who are not fluent with basic or complex computation	At least 3 times per week	At least 10 minutes	AIMSweb M-COMP	Any Early Numeracy, M-COMP, or M-CAP probe	1.1.2.1., 1.1.2.2., 1.1.2.3., 1.2.2.1., 1.2.2.2., 1.2.2.3., 2.1.2.1., 2.1.2.2., 2.1.2.4., 2.1.2.5., 3.1.2.1., 3.1.2.2., 3.1.2.3., 3.1.2.5., 4.1.2.1., 4.1.2.2., 4.1.2.5., 5.1.1.1., 5.1.1.4., 5.1.3.1., 5.1.3.2., 5.1.3.4.
Gradual Release of Responsibility (Re-Teach, Pre-Teach)	K+	Any Early Numeracy, M-COMP, or M-CAP probe	At least 3 times per week	At least 10 minutes	Any Early Numeracy, M-COMP, or M-CAP probe	Any Early Numeracy, M-COMP, or M-CAP probe	Any standard on which the student needs work as selected by the interventionist
Concrete, Representational, Abstract (CRA)	K+	Any Early Numeracy, M-COMP, or M-CAP probe	At least 3 times per week	At least 20 minutes	Any Early Numeracy, M-COMP, or M-CAP probe	Any Early Numeracy, M-COMP, or M-CAP probe	Any standard on which the student needs work as selected by the interventionist
Word Problem Structures and Schema	2+	M-CAP	At least 3 times per week	At least 20 minutes	AIMSweb M-CAP	M-CAP	1.2.2.4., 2.1.2.2., 2.2.2.2., 3.1.2.2., 3.1.2.3., 3.1.2.4., 3.1.2.5., 4.1.2.4., 5.1.1.2., 5.1.1.4., 5.1.3.4.

Name of Intervention	Grade Level	Entrance Criteria: Implement if Student has not reached Benchmark or at least the 25th percentile on:	Frequency	Length of Session	Progress Monitoring Probe	Exit Criteria: Discontinue Implementation when student reaches Benchmark or at least the 25th percentile on:	MN State ELA Standards Alignment
Math Vocabulary or Computation	1+	M-COMP or M-CAP	5 times per week	Primary – 20 minutes Intermediate – 30 minutes	M-COMP or M-CAP	M-COMP or M-CAP	1.1.2.1., 1.1.2.2., 1.1.2.3., 1.2.2.1., 1.2.2.2., 1.2.2.3., 2.1.2.1., 2.1.2.2., 2.1.2.4., 2.1.2.5., 3.1.2.1., 3.1.2.2., 3.1.2.3., 3.1.2.5., 4.1.2.1., 4.1.2.2., 4.1.2.5., 5.1.1.1., 5.1.1.4., 5.1.3.1., 5.1.3.2., 5.1.3.4., and related vocabulary for any standard
Math Vocabulary Journal	1+	M-CAP	4 to 5 times per week	At least 15 minutes	M-CAP	M-CAP	Related vocabulary for any standard
Peer-Assisted Learning Strategies - Math (PALS)	K+	Any Early Numeracy, M-COMP, or M-CAP probe	At least 2 times per week in K & Grades 2+ (3 times in Grade 1)	20 – 30 minutes (in peer partnerships)	Any Early Numeracy, M-COMP, or M-CAP probe	Any Early Numeracy, M-COMP, or M-CAP probe	Any standard related to Computation or Applications (Counting, Number ID, Geometry, Measurement, Fractions, Charts and Graphs. Money, Decimals, Word Problems)
Number Worlds	K+	Any Early Numeracy, M-COMP, or M-CAP probe	5 times per week	30 - 60 minutes	Any Early Numeracy, M-COMP, or M-CAP probe or Number Worlds PM within the	Any Early Numeracy, M-COMP, or M-CAP probe	Any standard related to Number Sense. Computation, Operations, Algebra, Data Analysis, Geometry and Measurement

Behavioral Intervention Options

In Bemidji Area Schools, certain student behaviors are dealt with by school administration using the school district's "Code of Consequences". Staff members should become familiar with the "Code of Consequences" and consult the building principal if students exhibit behaviors included in this document.

Emergency situations may arise when a student's behavior is uncontrollable or extremely violent (i.e. the student hurts self or others). These instances should be treated on a case-by-case basis, and they may call for immediate action by the appropriate school personnel. If student or staff safety is in question, immediate support must be requested. If a student must be restrained, a staff member trained in Crisis Prevention Institute's (CPI) *Nonviolent Crisis Intervention* strategies must be called.

Staff members should consult a school psychologist or social worker if a student exhibits the following kinds of behaviors: refusal to speak/communicate; excessive, long-term crying; withdrawal from activities; or difficulty with transitions. These behaviors may signal issues requiring the assistance of support personnel.

In some cases, behavior interventions may be conducted to try to help children learn to change their behavior. Once the difficulties of a student's behavior have been determined and behavioral baselines have been established, a teacher or school team should develop strategies to address the behavior.

A behavioral intervention should be thought of as actions and strategies to support the student in order to help him or her change behavior. Effective student supports are not punishment. Positive behavioral interventions increase the acquisition and use of new alternative skills, decrease the problem behavior, and facilitate general improvements in the quality of life of the individual, his or her family, and members of the teaching team.

Behavioral Interventions must:

- Include a prior gathering of baseline data, such as the frequency at which a behavior is occurring, before the intervention starts
- Include a teaching component (modeling an appropriate behavior for a student, doing social skill instruction, etc.)
- Involve some brief, daily face-to-face feedback or "base-touching" between the teacher and student
- Involve some collaboration regarding the implementation of the intervention among the adults involved with that child
- Involve some documentation or record-keeping regarding the target behavior(s) – rate, frequency, percentage, etc.
- Continue for 30 school days in order to "count" as a TAT-level intervention.

A Bemidji Area Schools' Behavior Intervention manual is available on First Class (username and password required). Click on the "Behavioral Intervention Manual" icon.

Sample Parent Notification of Reading Intervention

YOUR CHILD'S ELEMENTARY Parent/Caregiver Notification of Intervention

Date: _____

Dear _____,

Based on information gathered during school-wide reading assessment and on input gathered from the classroom teacher, it has been determined that your child may benefit from a 1-to-1 or small group reading intervention.

Students receiving intervention get additional practice and support in building their basic reading skills. Your child will receive instruction in the following:

- | | |
|--|---|
| ☐ Phonological Skills (Rhyming, Sound Blending, Phoneme Segmenting...) | |
| ☐ Letter Identification | ☐ Letter Sounds |
| ☐ Basic Phonics and Decoding | ☐ High Frequency/Sight Words |
| ☐ Structural Analysis (Prefixes, Suffixes, Multi-Syllabic Word Solving) | |
| ☐ Fluency (Reading Pace, Smoothness, Expression) | ☐ Vocabulary |
| ☐ Comprehension | ☐ Other: _____ |

The specific intervention to be used: _____

Interventionist: _____

The intervention will be delivered ☐ in the classroom ☐ outside of the classroom
_____ days a week from _____ (time).

If you have questions, please call the interventionist listed above at (school phone number).

We look forward to working with your child! Thank you!

BEMIDJI AREA SCHOOLS

Diagnostic Early Literacy and Reading Assessments

A selection of these diagnostics will be chosen to administer to a student based on benchmark scores and information from the teacher**:

Assessment	Administered if the student has not reached the benchmark or target score in:	The assessment measures the student's ability to:	Alignment to the ELA Standards
Phonological Awareness Skills Test (PAST)	MAP Growth	Distinguish the number of words in a spoken sentence; to rhyme; and to blend, segment, and manipulate syllables, onsets and rimes, and phonemes (individual sounds) in words	K.3.0.2., 1.3.0.2.
Quick Phonics Screener	MAP Growth	Name letters, produce the sounds of letters, and read a variety of increasingly difficult words in isolation and in sentences	K.3.0.1., K.3.0.3., 1.3.0.3., 2.3.0.3., 3.3.0.3., 4.3.0.3., 5.3.0.3.
Observation Survey (Grade 1 Only)	(if the child is being considered for Reading Recovery services)	Name letters, understand concepts about print (left to right, etc.), read high-frequency words, write words, hear and record sounds in words, and read text.	1.3.0.1., 1.3.0.3., 1.3.0.4
San Diego Quick Assessment	A curriculum sight word checklist	Read high-frequency sight words with automaticity	K.3.0.1., K.3.0.3., 1.3.0.3., 2.3.0.3., 3.3.0.3., 4.3.0.3., 5.3.0.3.
Fountas and Pinnell Benchmark Assessment System	MAP Growth	Read accurately with fluency and expression, comprehend text, and respond to text in writing or drawing; also indicates a student's independent, instructional, and frustrational reading levels	Grades K through 5: 1.1.1., 1.2.2., 1.7.7., 2.1.1., 2.2.2., 2.3.3., 2.7.7., 3.0.3., 3.0.4., 6.3.3., 8.2.2., and K.3.0.1., K.3.0.2.
Basic Reading Inventory & Early Literacy Assessment (Johns)	MAP Growth	<u>Early Literacy Assessment:</u> Name letters, write words, understand concepts about print, tell stories using pictures, read captions, discriminate auditorily, associate letters with sounds, segment phonemes in words, read high-frequency words, and read and comprehend text <u>Grade 1 and Up:</u> Read high-frequency words, read orally and silently and comprehend text, listen to and comprehend text	Grades K through 5: 1.1.1., 1.2.2., 1.7.7., 2.1.1., 2.2.2., 2.3.3., 2.7.7., 3.0.3., 3.0.4., 6.3.3., 8.2.2., and K.3.0.1., K.3.0.2.

**The STAR Tests of Early Literacy, the state MCAs, and the Measures of Academic Progress (MAP), also administered in the school district, may be used to help diagnose student needs.