

Nottingham West Elementary School
Systematic Interventions that Ensure Students Receive Additional Time and Support for Learning

Essential Question: How do we respond in our school when students don't learn?

Summary: *Recent consensus reports concur in suggesting major changes in the Federal regulatory approach to the identification of learning disabilities (LD). These reports recommend abandoning the IQ-discrepancy model and the use of IQ tests for identification, and also recommend incorporation of responsiveness to intervention (RTI) as one of the identification criteria. In order to ensure adequate instruction for students with LD, it is essential that identification practices focus on assessments that are directly related to instruction, that any services for students who are struggling prioritize intervention over eligibility, and that special education be permitted to focus more on results and outcomes, and less on eligibility and process. Identification models that incorporate RTI represent a shift in special education towards the goals of better achievement and behavioral outcomes for students identified with LD as well as those students at risk for LD.*

Background: 1977 Federal Definition has 3 components: Discrepancy, heterogeneity, and exclusion.

Discrepancy in most definitions is indicated by the presence of a difference between aptitude and achievement, represented in the Federal regulatory definition as a severe discrepancy between IQ and achievement test scores.

Heterogeneity represents the multiple domains in which LD occurs: Federal definition, including various disorders of basic reading skills, reading comprehension, math calculation, math problem solving, written expression, oral expression, listening comprehension, reading fluency skills, and language.

Exclusion component reflects the orientation that LD should not be identified if the primary cause involves a sensory disorder, mental deficiency, emotional disturbance, economic disadvantage, linguistic diversity, or inadequate instruction.

Thus, a student who meets the criteria stemming from the first three components is presumed to have an achievement problem that is due to neurobiological factors.

These components, which have served as the foundation for identifying students with LD since the inception of the construct, resulted from a general agreement that this was the best way to proceed considering the lack of empirical evidence. **This definition continue to prevail despite the emergence of a significant evidence base that suggests problems and alternatives to this consensus.**

Jump to 2009:

- Focus on accountability for results and the implementation of evidence-based instructional approaches.
- Efforts specifically targeted on improving reading instruction.

- Concerns were that schools could not close the achievement gaps of economically disadvantaged which eventually led to the NCLB Act of 2001
- NCLB is also affecting special education legislation (IDEA) which is being reconsidered for reauthorization by Congress.
- Emphasis of the research behind the reauthorization is that the number of individuals identified with LD could be reduced if more effective reading instruction was in place
- Bills under consideration allow for the loosening grip of the US Federal regulatory definition of LD allowing not using IQ discrepancy or even not giving IQ tests and allowing RTI criteria.

NH Criteria

1. Must not require the use of a severe discrepancy model between intellect and achievement
2. Use scientific, research based intervention
3. Data that demonstrates that prior to, or as a part of, the referral process, the child was provided appropriate instruction in regular classroom setting, delivered by qualified personnel
4. Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.

Recommendations by National Center for Learning Disabilities; National Research Center for Special Education; National Institute of Child Health and Human Development

1. Abandonment of the IQ discrepancy model
2. Restricted role of IQ testing
3. Focus on lack of achievement
4. Exclusionary criteria
5. RTI Identification

Why is change needed?

Years ago, special ed laws made it possible for student with special needs to attend public schools, now that this problem has been resolved, the next issue is to enhance instructional outcomes, aligning theory and practice with NCLB philosophy

Reasons:

1. Movement away from *test and treat* to *treat and test*.
2. *Revision of extensive assessment to diagnose LD as a prerequisite to intervention is unnecessary and not supported by evidence that these models are related to better student outcomes. Screening and evaluation of academic skills in the service of intervention and to determine level of risk for LD is not time consuming, especially in relation to the present identification process.*

3. IQ-discrepancy or the replacement of IQ by any form of cognitive assessment (excluding achievement tests) has been uniformly criticized not only for its lack of an evidentiary basis, but also because such approaches are not adequately reliable or equitable. The IQ discrepancy criterion is potentially harmful to students as it results in delaying intervention until the student's achievement is sufficiently low so that the discrepancy is achieved. Simply put, students who learn to read early are higher achievers because they have access to learning both more content knowledge as well as word meanings –critical means for improving knowledge, language, and comprehension. In the reading area, students who don't access print early in school fall behind their peers in the development of a sight word vocabulary, leading to fluency difficulties. Not surprisingly, the "wait to fail" model that exemplifies identification practices for students with LD does not result in significant closing of the achievement gap for most students placed in special education. Many students placed in special education as LD show minimal gains in achievement and few actually leave special education. Nationwide, virtually every student considered for special education eligibility receives IQ and achievement tests. This practice consumes significant resources.

What are the Alternatives?

1. Emphasis on universal screening of all students for reading difficulties in the early school years (kindergarten, grade 1, or earlier),
2. Placement in early intervention programs
3. Careful monitoring of progress with accountability for results. Students can be identified with LD if they maintain deficient achievement; do not adequately respond to increasingly intense interventions.

What Are The Advantages Of Incorporating Response To Intervention?

There are several advantages to using RTI as one factor in the identification of students as LD:

1. A focus on RTI aids in formally addressing the requirement that "a child shall not be determined to be a child with a disability if the determinant factor for such determination is lack of instruction in reading or math" Without some RTI activities in place, this component of IDEA is merely surmised and not measured. **Lack of RTI criteria place schools in violation of the Federal statute, and at substantial risk for denying students their right to a free and appropriate public education.**
2. *The focus shifts from eligibility to concerns about providing effective instruction.* Shift from waiting for students to meet IQ discrepancy criteria (wait to fail) to identifying students who need intervention as early as possible and providing it immediately. Eligibility determination is therefore supported by systematic efforts at enhanced instruction and progress monitoring, not from a protracted evaluation process that takes place in isolation from the classroom and has historically proven to have no benefit for those deemed eligible.

3. Another advantage to an approach that incorporates RTI is that identification is not dependent on teacher referral. Teacher referral has been demonstrated to be biased, yielding disproportionate numbers of boys and African-Americans, likely reflecting behavior management difficulties that make many referred students difficult to manage in the classroom (Various studies report that 70% to 80% of all students referred for special education eventually were identified and placed in special education, raising questions as to why the elaborate referral and assessment process was even necessary).
4. Our most pressing challenge is conveying urgency about preventing disabilities through early screening and effective instruction and, for those who do not respond sufficiently, providing effective special education interventions that change achievement and social/behavioral outcomes.
5. Including RTI as one of the criteria for identification allows educators and parents to immediately provide students with well-targeted and much needed intervention rather than waiting for extensive, time-consuming assessments that offer little or no information to inform instruction. The alternative to this form of assessment uses formal progress monitoring, which involves the use of short reading or math probes on a frequent basis in relation to intervention. Such an approach incorporates RTI and ensures that any referral to special education includes data indicating how the student has responded to various interventions. Families do not have to wait for the deliberations of the interdisciplinary team to be completed before initiating efforts to provide assistance to their child since they receive intervention throughout the process. Using RTI criteria requires general and special education to operate as a seamless, unified system, not the dual system that is currently in operation in most school districts. Such models would also require that alternative interventions be established so that special education would not be the only pathway to assistance, a situation characteristic of many schools and districts.
6. The adoption of progress monitoring and RTI shifts the focus from a set of test scores that have limited utility for improving interventions to approaches that design and guide instruction to accelerate progress. Thus, screening for learning problems occurs before intervention and formal assessment for eligibility purposes is a *consequence* of instruction, not a prerequisite. A student with LD is identified as one who has *unexpected* difficulty learning and the *discrepancy* is measured relative to the expectation that most students can learn if quality instruction is provided. **The definition and identification of students as LD become inherently linked to instruction and the narrowing of the achievement gap. Improved instruction and reducing the achievement gaps should be primary goals in general and special education.** If a student needs special education because of a lack of RTI, the interventions provided in special education should be more intense and specialized than what was provided in general education or as part of the pre-referral process, requiring the flexibility and individualization built into IDEA.
7. Criteria that include RTI set the narrowing of the achievement gap as an explicit goal of both general and special education, thus irrevocably linking IDEA and NCLB.

Linking IDEA and NCLB

The proposed alternative approaches to LD identification, like NCLB, require a focus on reading problems, early intervention, assessment of progress, and accountability for results. They are not restricted to reading, with examples of implementation in other IDEA categories, such as behavior problems. But reading difficulties account for the largest single group of students in special education and typically occur early in schooling. The President's Commission on Excellence in Special Education (2002) reported that most students identified with LD were placed in special education because of reading difficulties, representing 2 of every 5 students in special education- by far the largest single group of students). But when aggressive reading programs are implemented with accountability for results, LD identifications are reduced.

Alternative approaches to LD identification are thus compatible with the tenets of NCLB and promote the goal of maximizing achievement for all students. In these examples, many students who did not have a disability were kept out of special education while other students with a disability received supports that lead to successful reading, thereby providing appropriate intervention early. The student who needs the protection of special education is the student who has not been able to learn at a reasonable rate. Even after identification, the student receiving special education services will require continued monitoring of progress with accountability for results as a common denominator for general and special education. *If the LD component of IDEA is not modified, it will be inconsistent with NCLB and dilute its impact.* The students most likely to be harmed by this dilution are those with disabilities.

Is the fundamental concept of LD changed?

Shifting the focus of LD to the student who does not respond to intervention retains the concepts of "discrepancy" and "unexpectedness." But instead of operationalizing the concepts of "discrepancy" and "unexpectedness" based on formal IQ tests that have little bearing on intervention, they are gauged in relation to the effectiveness of carefully targeted intervention. Thus, the student who does not respond adequately to intervention displays a severe discrepancy in relation to the expectation that most students can be taught to read, write, and do math- a key tenet of NCLB. The students who would be served under IDEA would therefore change, as students more appropriately identified as "instructional casualties" would be identified and provided accelerated instruction, primarily by general education personnel and, when necessary, through shared instructional efforts of general and special education personnel. These students would be excluded from the formal special education assessment and identification through effective instruction in general education (Lyon et al., 2001), reflecting the primary focus on teaching the student, not on what the student has failed to learn.

Doesn't IQ predict achievement?

Like many other factors, performance on IQ tests is a moderate predictor of general academic achievement. However, within groups of students with LD, IQ is a weak predictor. One very popular but invalid assumption is that IQ tests assess an underlying construct (aptitude) that predicts how well a student with LD should learn. In fact, IQ does not predict how well students with LD learn reading or math, or their prognosis. IQ can be considered a measure of past

learning that is in part an outcome of the same processes that led to the LD. Thus, a student with early language problems often shows lower scores on both IQ and reading measures because of the language problem. Other factors predict achievement as well as IQ, including parental education, income, and other indices of socio-economic status (SES), and even these variables are weak predictors of the performance of students with LD.

Neither IQ nor SES predicts future achievement as well as prior achievement. Interpreting IQ tests as measures of aptitude yields misunderstandings and misapplications that can be damaging to children and their families.

Is there a problem with the definition of LD, or just with the implementation of the current identification process?

In many school systems, special education is often the only alternative to conventional classroom instruction. In other schools, discrepancy criteria are rigidly enforced, leading to disputes over eligibility and always leaving students who need help entrenched in a cycle of failure. In some instances, this reflects an attempt to use identification procedures as a gate-keeping device. *The fundamental problem with these approaches is that they focus on eligibility and not on student needs.* Making current test focused identification procedures more rigorous will not make the assessments used more appropriate for identification as LD, nor will they reduce the tendency of general education to divest itself of the responsibility for educating students who struggle to learn. The best solution to concerns about identification (and over-identification) is better instruction, first in general education and then in a cooperative effort with special education. More rigorous implementation of procedures for identification, like IQ-discrepancy, will not address its lack of an evidentiary base, which has been questioned from the inception of its adoption in Federal regulations.

Will valuable information about cognitive processing be lost without IQ tests?

Despite many efforts to show relations of a wide variety of presumed underlying cognitive processes to interventions, no research foundation exists for this very popular assertion. Regardless of whether cognitive processing is conceptualized as a modality (visual or auditory), intact and deficit neuropsychological functions, successive or simultaneous processing, or the many variations of learning style, there is little data showing that either teaching the cognitive processes produces better achievement or that matching instruction to cognitive processing strengths leads to better achievement. The anecdotal links between cognitive processing and instruction are at best appealing experimental hypotheses that have not been validated despite extensive efforts over the past 30 years. In contrast, components of efficient reading such as word identification, fluency, and comprehension can be taught, which leads to improved achievement. Information on students' learning styles and information processing deficits are best discerned during instructional efforts, when they are at least tied to instruction and not to a set of sterile test scores.

Should other forms of discrepancy be considered?

It has been argued that the hallmark of LD is some form of ability or intrapersonal discrepancy. This statement is accompanied with alternative recommendations for assessments of aptitude, such as listening comprehension, or the use of measures of cognitive or neuropsychological processing. There is no question that when a student demonstrates unevenness in their development of different skills, LD may be indicated. However, this does

not mean that a classification model based on the search for these students is a defensible practice. First, not all students who demonstrate unevenness in their development are LD as it also depends on the student's level of achievement. Many students with LD are low achievers in all academic domains. Thus, the use of uneven development as a sole criterion is indefensible. Second, students with LD who have uneven performance across processing domains often demonstrate these discrepancies in their academic performance, such as the student who reads accurately, but slowly, or reads well but struggles with math or writing. Students must be evaluated on an individual basis and assessed for intra-individual differences in the seven domains that comprise the definition of LD in the law. Third, measures of processing have no demonstrable relationship with outcomes and are not well delineated for all forms of LD. Finally, any reliance on discrepancy carries with it the psychometric problems described throughout this paper. This model is simply another example of the "test and treat" approach that has not been effective for students struggling to learn. Although the presence of significant unevenness in achievement profiles is a meaningful indicator of certain types of LD, the absence does not mean that the student does not have LD, and does not justify extensive assessments of cognitive skills.

Is the research base for alternative models adequate?

Bringing new education practices to scale is always a challenge, and there are many roadblocks to moving from policy to implementation. These challenges include: preparing professionals to adequately implement the research-based screenings and interventions; preparing and offering ongoing technical assistance and support to professionals to implement progress monitoring measures to ensure that RTI can be effectively implemented; carefully monitoring students who benefit from supplemental interventions to ensure that they do not return to "risk" status; and obtaining materials and resources that represent these research-based practices so that they can be readily used by professionals in schools. Many teachers in general education and special education are not well-prepared to provide research-based instruction, especially in the area of reading (Lyon et al., 2001). These problems include inadequate preparation in all components of reading instruction in preservice programs and inadequate understanding of concepts involving phonological awareness and the structure of language. There is also the need to resolve measurement issues involved in identifying specific students as non responders, so that RTI cannot be the sole eligibility criterion. Fortunately, the measurement issues that characterize RTI approaches are well understood and the fact that progress monitoring entails multiple assessments helps educators to successfully implement programs of instruction that precede (or negate) formal special education referral.

Although it may appear that resources are inadequate to implement these changes, the real task is to more effectively utilize the resources that presently exist with a focus on improved student outcomes through better educational practices. Whenever educational change is introduced, implementation integrity is difficult. Simply implementing progress monitoring (as required in NCLB) would be a significant step towards alternative approaches to the identification of LD.

What about students who make progress during the intervention but make limited progress after they are released from the intervention?

There are students who make progress as a result of pre-referral intervention, but struggle once they no longer receive targeted instructional support. Response to intervention models should monitor progress in all students who are at risk, including those who exit an intervention. When

progress is monitored, school personnel will be able to quickly recognize that students are not maintaining progress. Such students can reenter the intervention. A simultaneous investigation of the learning environment in which adequate progress is not apparent can be initiated to identify factors that contributed to students' continued struggle to learn (Fuchs & Fuchs, 1998). The key to ensuring student success is to have data that indicate the progress students are making so that these determinations can be made. Lack of progress in classrooms when intervention no longer occurs could be a valuable data source for determining whether adequate instruction is provided as part of the core instructional program, whether group sizes are too large and the target students would respond more effectively if the group size were reduced, and the extent to which contextual factors such as school attendance, home supports, and other factors were influencing learning.

Although many students with LD also are distractible and have retrieval deficiencies, these problems in the absence of clearly specified achievement difficulties are better subsumed under other disorders, such as ADHD or specific language impairments, where the implications for intervention are more directly linked with identification. Children with LD and ADHD have two disorders, both of which need intervention (Lyon et al., 2002).

Another common concern involves students who obtain achievement test scores that are above average, but below scores on an IQ test. This finding is often an artifact of failing to correct for the correlation of IQ and achievement tests. On average, extremely high IQ test scores will be associated with lower achievement test scores due to a statistical problem known as "regression to the mean" in which the less extreme score on two correlated tests moves to the average. A student, for example, with an IQ score of 130 (95th percentile) and an achievement quotient that is 15 points lower is not discrepant if the correlation of the two tests is taken into account. The actual amount of the discrepancy to represent this difference at the 50th percentile (100) would be closer to 24 points at levels of IQ as high as 130, depending on the correlation of the two tests.

What about the "slow learner"?

Students with mental retardation have different instructional needs than students with LD. Moreover, the critical piece of information for identifying a student with mental retardation is a pervasive deficit in adaptive behavior socialization, self-care skills, and independent living capabilities. Students with LD may have selective deficits in adaptive behavior, but not a pervasive deficit (Bradley et al., 2002). The slow learner concern typically revolves around the question of what to do with a student with an IQ score in the 70- 80 range who "cannot be expected to learn" at an age appropriate rate. This type of student typically does not have pervasive adaptive behavior deficits and is not eligible for the mental retardation category. The concern, often made in parallel with concerns about parental expectations, presumes that IQ is a strong predictor of RTI, which it is not. The extent to which our conceptions are permeated by antiquated "milk and jug" thinking should be of concern to anyone interested in LD, reflecting the culmination of years of inappropriate interpretations of IQ test scores. Milk and jug thinking is epitomized by the following quotation in 1937 from Sir Cyril Burt:

Capacity must obviously limit content. It is impossible for a pint jug to hold more than a pint of milk and it is equally impossible for a

student's educational attainment to rise higher than his educable capacity (p.477).

There is no evidence that IQ tests set an upper limit on a student's ability to learn. The only way to assess learning potential is to teach a student and gauge RTI.

Conclusions: Line up IDEA with NCLB

As the education community considers potential changes in LD identification, we observe that most of the provisions recommended as alternatives to IQ-discrepancy models are already allowed in IDEA. However, without well articulated policy and regulations, many schools and parents will be without direction. The most significant challenge in revamping identification procedures and enhancing results for students with LD involves the concept of "aptitude" and how it has traditionally been utilized in models of LD. Even if we reject the use of IQ as an indicator of aptitude, the notion that a student with LD has a discrepancy relative to aptitude as measured by tests deviates from historic conceptions of LD as an inability to learn despite the presence of adequate opportunity. *A major advantage of shifting the focus in LD identification from IQ status to inclusion of RTI is that it more appropriately and immediately addresses the instructional needs of students who are difficult to teach, as opposed to the current model of waiting until they have failed in school.* This allows for learning to be measured through progress monitoring as part of a systematic effort at intervention (Fuchs & Fuchs, 1998). Such approaches facilitate the integration of general and special education around instruction, line up IDEA with the laudatory goals of NCLB, and lead to federal regulations and conceptual models of LD consistent with our best research about teaching and learning.

General and special education students alike deserve instruction and support that is appropriate to their learning needs. Service delivery to students in special education needs to be more focused on results and less on process. Obstacles that prevent these changes need to be removed. Otherwise it is likely that the construct of LD as currently implemented will wither and expire due to the absence of evidence linking identification to improved outcomes.

These arguments in favor of alternative models are not simply about RTI. The alternative models recognize that most forms of LD emerge early in school and can be identified through universal screening. **Students who are at-risk should receive accelerated instruction through standard, scientifically-based protocols, with their progress constantly monitored. Those who do not respond should be candidates for special education.**

Additional criteria for identification (e.g., exclusions, educational needs) should be considered by an interdisciplinary team. The students who emerge from this process and qualify for special education will, if the interventions are appropriate and provided with integrity, be different from those who are currently served because instructional casualties will be eliminated. **The key, of course, is better instruction provided earlier in schooling and enhanced coordination between general and special education.**

The debate about alternative models is not simply IQ-discrepancy or low achievement versus RTI. It is about whether special education continues to use the now indefensible psychometric models adopted in 1977 or moves to alternative models that prioritize instruction and not

eligibility, and student learning as opposed to process. In making these shifts, IDEA becomes aligned with NCLB, ensuring that general education and special education operate as a unified system with common goals. The NCLB act represents an unprecedented opportunity for the special education community. It requires students with disabilities to be part of the accountability system, which means that they must be afforded effective instruction if schools are to meet NCLB goals.

Adopting alternative models of the sort proposed in recent consensus documents will permit special education students to fully benefit from the mandates built into NCLB. Improved achievement and behavioral adjustment should be the goals and outcomes of any educational practice. **We have an obligation to think of students who are struggling to learn as difficult-to teach before we label them as unable to learn.**

Essential Question: How do we respond in our school when student don't learn?

What types of assessments do we give to our students in the area of reading?

Current School year 2008 -2009

Entering Grade 1

- Brigance screening

Grades 1

- Kindergarten in Review assessment – phonemic awareness- letter sound identification, segmentation, high frequency words.

Grades 1-3 (All students)

- Scott Foresman Baseline Assessment
- This assessment allow teachers to gather a snapshot of their students reading performance in the five components of reading, this also allows teachers to create reading groups. (Strategic, On Level, Advanced)
- Teachers also have weekly assessments they should be giving Spelling assessment, fluency assessment for specific group, & selection test
- There is also a Unit assessment for each of the themes, which again includes the 5 components of reading, and a writing piece.

Students who score below 60% on the Scott Foremen Reading Assessment receive a placement test for the program:

- Weekly assessments are given to the students, which focus on the phonics skills that were worked on , as well as the high frequency words that were covered during the week. Bi weekly – fluency assessments are done as well as retells.
- After each theme is completes the students are also given an end of Unit assessment to check their understanding of skills covered. Reading staff also identify skills that need we need to re-teach to the group.
- After second quarter is done, teacher will report classroom Unit test scores to the Reading Specialist and we review our assessment scores. To see how students are progressing.
- If students are scoring 80% or above on the Sidewalks assessments, there are several steps that we can take to see if students are ready to exit the program.
 1. Scoring 80% or above on Sidewalks Unit Assessments
 2. Is the child able to profit from classroom instruction?
 3. Is the child performing successfully in the classroom reading program with or without assistance/
 4. Reading Department will do a check of On-level Material (Read / Retell)
 5. Determine accuracy – 85% or better
 6. Determine comprehension- Can the students retell effectively
 7. Depending on the scores, students will exit for the program.
- If the student exits from the program, the Teacher and the Reading Specialist will continue to monitor student progress. If needed a student may return to the intervention program.

Grade 4 & 5 Students

Because we currently have the two different reading programs, the fourth and fifth grade have a rubric they use to identify students who are struggling in the area of reading.

| | |
|--|--|
| Spring 08 Gates Score | 1-3 below average 4-6 average 7-9 above average |
| NECAP Reading Scores (# & category) | Proficient Partially proficient Substantially Below proficient |
| Reading Grades (you may also want to preview year before) | |

| | |
|---|--|
| Teacher Recommendation (how do you see them as a reader?) | Proficient Partially proficient Substantially Below proficient |
|---|--|

- Once students were identified, they were then given the PAPA

(Phonemic Awareness and Phonics Assessment), we wanted students to score and 85% (criterion reference) on this assessment.

- If students scored below the 85% or we noted struggle during the PAPA, we then gave them the Gates reading test.
- We looked at the assessment and then we identifies students who scored low 4's (30% and below) , and all 1's,2's & 3's .

These students are using the Language! Program this year.

- A placement test is given to these students to identify the starting point (Unit to begin with)
- Within the Language program, we monitor the five components of reading, using a unit assessment.
- Because the Language program, is more of a remediation program exiting the program typically occurs when the reading staff review the data, looking for 80% and higher on end of the unit assessments and discuss with the teacher student performance within the classroom.

If the student exits from the program, the Teacher and the Reading Specialist will continue to monitor student progress.