Harlan County RTI Process Matrix 2014-15

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| **SCREENING** | **Tier 1** | **Tier II** | **Tier III** |
| All students participate.  Purpose: To develop benchmark data norms in order to identify at-risk students for intervention. | Universal Screener administered to all students 3 times a year in reading, math behavior and written expression. (Used as a broad guideline, can be informed by teachers and parents)  **\*False positive:** If a student is identified through screening measures as at-risk and other data (including teacher information) indicates this child is NOT at risk, then a second screen can be administered OR the school RTI committee can review the data (including teacher recommendation) and decide to leave the student in Tier 1. | Receive same Universal Screening plus additional diagnostic screening when appropriate.  Other pertinent screen data such as vision, speech, motor, behavior, medical, and attendance data is also included and reviewed. | Receive same as Tier II plus additional diagnostic screening when appropriate. |
| *We Use:* | STAR Enterprise  Star Early Literacy: K-1; Star Reading: 2-8; Star Math: 2-8  Infinite Campus Behavior Incident reports for Behavior.  Writing Prompt and Grade-Level Scoring Rubric for Written Expression. |  |  |
| *Who is involved?* | All students and staff. | Students receiving Tier II intervention services. | Students receiving Tier III intervention services. |
| **INSTRUCTION** | **Tier 1** | **Tier II** | **Tier III** |
| Purpose: To provide students with high quality research-based instruction and interventions matched to student need. | All students receive universal scientifically research-based instruction delivered with fidelity. Based on state standards and curriculum frameworks. | Students receive research-based intervention instruction in addition to universal instruction. | Same as Tier II. Plus, instruction is more frequent, more intense, and more individual. |
| **INTERVENTIONS** | **Tier 1**  **(80%)** | **Tier II**  **(15-20%)** | **Tier III**  **(5-10%)** |
| Purpose: To close the achievement gap for at-risk students. | Universal instruction: core research-based programs, research-based instructional strategies (Marzano) and differentiated instructional strategies are used to meet the needs of all students. | Scientifically research- based intervention programs and strategies are administered to at-risk students a minimum of 90 minutes per week either in the regular classroom or outside the classroom. Interventions are targeted to areas of skill deficits as indicated by screening and diagnostic data. | Scientifically research-based intervention programs and/or strategies are administered to at-risk students a minimum of 120 minutes per week *outside* the regular classroom setting by an intervention teacher. Tier III intervention programs/strategies are more intensive, more individual, and more frequent than Tier II. Interventions are targeted same as Tier II. |
| *Who is involved?* | Regular classroom teachers. | Regular classroom teacher and/or intervention teacher. | Intervention Teacher. |
| **PROGRESS MONITORING** | **Tier 1** | **Tier II** | **Tier III** |
| Purpose: To determine if intervention is working or if a change needs to occur and applying child response data to important educational decisions. | All students are continuously monitored through formative and summative assessment in the regular classroom. | Students are progress monitored no *less* than one time each week.  Measureable goals are set according to baseline data and progress monitored toward reaching those goals. Goal lines and trend lines are developed and monitored. | Students are progress monitored no *less* than one time per week. Goals are set and monitored same as Tier II.  Progress Monitoring at Tier 3 can be more frequent. |
| *We use:* | Various formative and summative assessments. If a student did not screen into T2 intervention services and a teacher has additional data that a student may be at-risk, that teacher may refer student to school RTI committee for review. Other diagnostic measures or a repeat screen may be administered. | Curriculum based measures and other program related progress monitoring instruments. School RTI team (including classroom teacher) reviews progress after 4 data points to determine if intervention is successful, if a different strategy should be applied, if gap has been closed, or if movement to another tier is appropriate. | Curriculum based measures and other program related progress monitoring instruments. School RTI team (including classroom teacher) reviews progress after 4 data points to determine if intervention is successful, if a different strategy should be applied, if gap has been closed, or if movement to another tier is appropriate. |
| *Who is involved:* | Classroom Teachers and school RTI team. | Classroom Teacher and/or intervention teacher(s) and RTI team. (School RTI team includes principal, regular classroom teacher, intervention teacher and others as assigned by school leadership.) | Classroom Teacher, intervention teacher(s) and RTI team. |
| **Parent Involvement** | **Tier 1** | **Tier II** | **Tier III** |
| No Parent permission is required for admission into RTI program. | All parents are notified of Universal Screening results through parent conference. | When a student is referred for intervention services parents are notified by letter, phone, or face to face. Parent contact is made once per month to notify parents of student progress. When a student moves from one tier to another parents are notified. Parents are also invited to participate in RTI meetings. Parent contact is documented through a Parent-Contact log. | Same as Tier II |
| *Notified by:* | Classroom Teacher | Classroom Teacher  And/or Intervention Teacher | Classroom Teacher And/or Intervention Teacher |

**Components of RTI Model**:

* Universal Screening
* Core Instruction
* Progress Monitoring
* Tiered Service Delivery
* Data-based decision making
* Parent Involvement
* Fidelity of Implementation

Scientifically research-based means the program or strategy has been accepted by a peer-reviewed journal or approved by a panel of independent experts through a comparably rigorous, objective, and scientific review (Federal Register, Volume 71, No 156, Rules and Regulations, page 46683).

Statutory Reference: KRS 158.6453.

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