

Response to Intervention (RTI) is a multi-tier approach to the early identification and support of students with learning and behavior needs. The RTI process begins with high-quality instruction and universal screening of all children in the general education classroom. Struggling learners are provided with interventions at increasing levels of intensity to accelerate their rate of learning. These services may be provided by a variety of personnel, including general education teachers, special educators, and specialists. Progress is closely monitored to assess both the learning rate and level of performance of individual students. Educational decisions about the intensity and duration of interventions are based on individual student response to the instruction. RTI is designed for use when making decisions in both general education and special education, creating a well-integrated system of instruction and intervention guided by child outcome data.

For RTI implementation to work well, the following essential components must be implemented with fidelity and in a rigorous manner:

- **High-quality, scientifically based classroom instruction.** All students receive high-quality, research-based instruction in the general education classroom.
- **Ongoing student assessment.** Universal screening and progress monitoring provide information about a student's learning rate and level of achievement, both individually and in comparison with the peer group. These data are then used when determining which students need closer monitoring or intervention. Throughout the RTI process, student progress is monitored frequently to examine student achievement and gauge the effectiveness of the curriculum. Decisions made regarding students' instructional needs are based on multiple data points taken in context over time.
- **Tiered instruction.** A multi-tier approach is used to effectively differentiate instruction for all students. The model incorporates increasing intensities of instruction offering specific, research-based interventions matched to student needs.
- **Parent involvement.** Schools implementing RTI provide parents information about their child's progress, the instruction and interventions used, the staff who are delivering the instruction, and the academic or behavioral goals for their child.

The RTI Model

- RTI begins in the general education classroom, with evidence-based curricula taught by highly qualified teachers (HQT) who use effective instructional and differentiated practices and who are supported by effective classroom management and positive classroom process.
- The goal of RTI is to support the learner to become an independent learner and self-manager of emotions and behaviors. The focus is on favorable student outcomes that will best equip the learners to ultimately become ready for college and careers.
- **Academics:** RTI involves the ongoing process of providing effective, differentiated instruction to all students and determining their mastery of material through authentic curriculum-based, formative assessments and progress monitoring. Student grades, work samples, and authentic assessments; teacher observations and evaluations and evaluations (current and prior); state standardized assessments and other benchmark assessments; and student self-reports should be used as part of the universal screening.
- **Behavior:** RTI also involves the ongoing process of creating and maintaining positive classroom climates, using effective classroom management strategies and social skills instruction and determine students' mastery and demonstration of pro-social skills through classroom assessments, behavioral observations and reports from teachers and other staff in the classroom.



Tier 1

Within Tier 1, all students receive high-quality, scientifically based instruction provided by qualified personnel to ensure that their difficulties are not due to inadequate instruction. All students are screened on a periodic basis to establish an academic and behavioral baseline and to identify struggling learners who need additional support. Students identified as being “at risk” through universal screenings and/or results on state- or districtwide tests receive supplemental instruction during the school day in the regular classroom. During that time, student progress is closely monitored using a validated screening system such as curriculum-based measurement. At the end of this period, students showing significant progress are generally returned to the regular classroom program. Students not showing adequate progress are moved to Tier 2.

Tier 2

Students not making adequate progress in the regular classroom in Tier 1 are referred to I&RS and provided with increasingly intensive instruction matched to their needs on the basis of levels of performance and rates of progress. Intensity varies across group size, frequency, and duration of intervention, and level of training of the professionals providing instruction or intervention. These services and interventions are provided in small-group settings in addition to instruction in the general curriculum. In the early grades (kindergarten through 3rd grade), interventions are usually in the areas of reading and math. A longer period of time may be required for this tier, but it should generally not exceed a trimester. Students who continue to show too little progress at this level of intervention are then considered for more intensive interventions as part of Tier 3.

Tier 3

At this level, students receive individualized, intensive interventions that target the students’ skill deficits. Students who do not achieve the desired level of progress in response to these targeted interventions are then considered for a referral to the Child Study Team for a comprehensive evaluation to determine eligibility for special education services under the Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004). The data collected during Tiers 1, 2, and 3 are included and used to make the eligibility decision.