



**PUTNAM**  
COUNTY CHARTER SCHOOL SYSTEM  

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inspire. innovate. excel.

**Response to Intervention**

**(RTI)**

**2014-2015 Handbook**

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## Mission Statement

The mission of the Putnam County Charter School System is to assist all students in acquiring knowledge, fostering aspirations, and developing life skills that will empower them to become self-directing, productive contributing members of a global society.

## Putnam County Charter System Board Goals

- Goal One:** To ensure high levels of performance for all students in Putnam County
- Goal Two:** To ensure fiscal responsibility and effective resource stewardship
- Goal Three:** To develop leadership and staff capacity throughout the system
- Goal Four:** To actively engage students, parents and community stakeholders

## Response to Intervention (RTI) Introduction

### Core Principles of RTI

RTI is grounded in the belief that ALL students can learn and achieve high standards when provided with effective teaching, research-based instruction, and access to a standards-based curriculum. A comprehensive system of tiered interventions is essential for addressing the full range of students' academic and behavioral needs. Collaboration among educators, families, and communities is the foundation of effective problem solving, and on-going academic and behavioral performance data should inform instructional decisions. Effective leadership at all levels is crucial for RTI implementation.

### Response to Intervention Definition

RTI is an integrated approach that includes general, remedial, gifted, ESOL and special education in providing high-quality instruction that is matched to individual student needs. It is based on a four-tiered model that monitors student progress with different levels of intervention intensity. By providing scientifically-based intervention to students, monitoring progress on interventions, and using this information to determine which students are in need of more intensive services, RTI further builds on the requirements of the Elementary and Secondary Act (ESEA). The Individuals with Disabilities Education Act (IDEA) 2004 requires utilizing the RTI process as an alternative approach for the identification of students with learning disabilities.

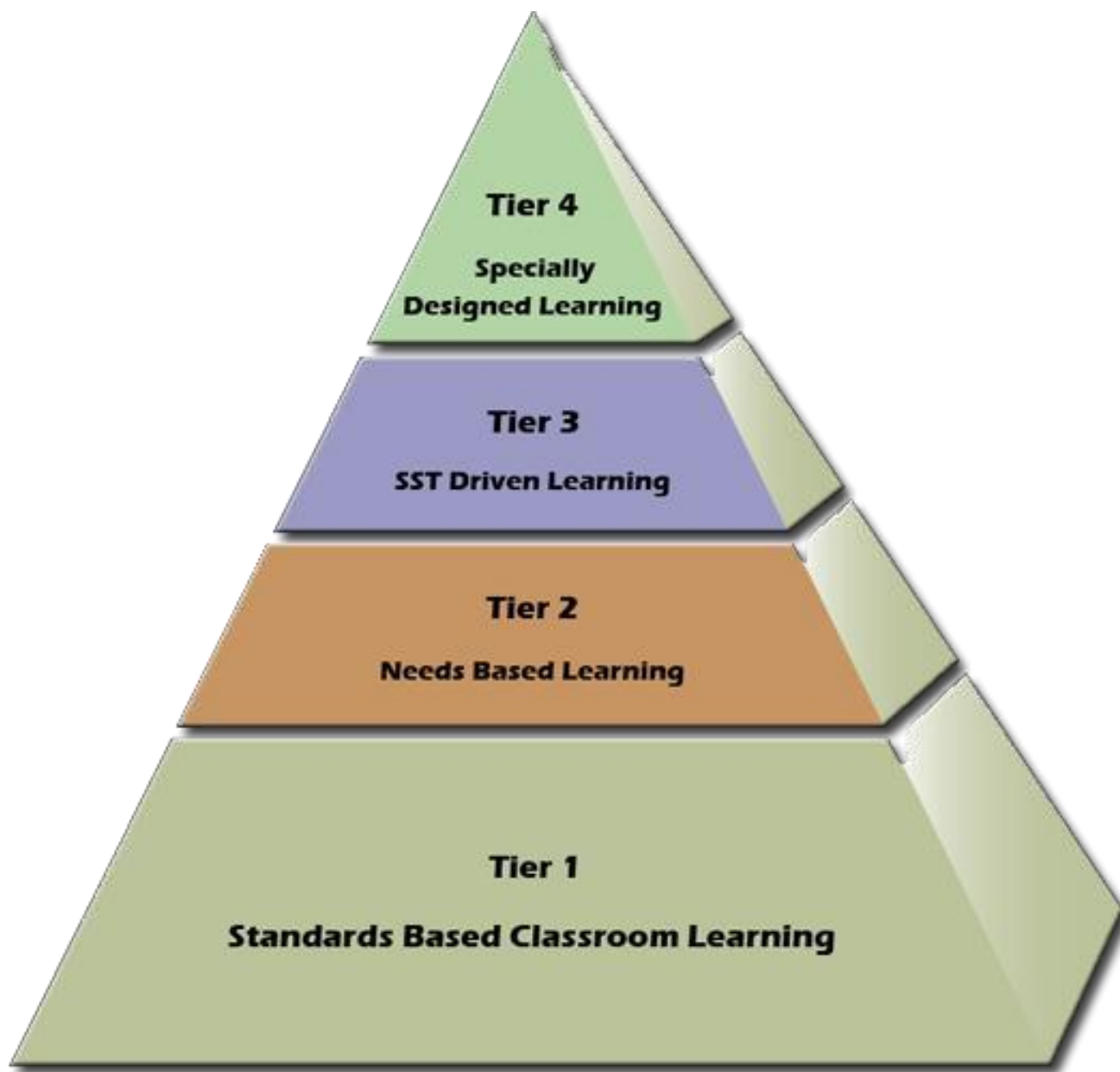
### Major Components

1. **Leadership:** Leadership at the state, district, and building level is crucial to the fidelity of RTI implementation. It is important to establish a long-term commitment to resources and time, as well as moving the focus of RTI from philosophical understanding to actual practice. The impact of RTI involves significant systematic changes which need to be supported throughout implementation at all levels.
2. **Curriculum & Instruction:** RTI involves a tiered system of interventions designed to meet the needs of all students. A strong curriculum based on state and national standards and high-quality instruction are essential.
3. **School Climate & Culture:** A positive school climate provides the foundation on which instruction will occur and all students will be engaged in learning. Positive Behavior Intervention Supports (PBIS) provide systematic strategies for achieving important social and learning outcomes, while preventing problem behavior with all students.
4. **Problem-Solving Process:** The purpose of the problem-solving process is to provide a decision-making process that will lead to the development of instructional and intervention strategies with a high probability of success. The system must integrate the use of data, both to guide the development of effective interventions and to provide frequent monitoring of progress.
5. **Assessment/Progress Monitoring:** Using reliable and on-going data to drive the decision-making process for individual students at all grade levels is a major component of any RTI system. There are four types of assessment:

- a. **Benchmarks:** Benchmarks are quick (1-5 minute) measures of overall ability and critical skills known to be strong indicators that predict student performance. Screenings are administered to all students, usually three times per year.
  - b. **Progress Monitoring:** Progress monitoring (PM) are brief (1-5 minute) measures used to determine whether students are making adequate progress. PM provides information on the effectiveness of instruction and whether to modify the intervention. Progress monitoring is often done frequently, at least once per week. This progress is demonstrated graphically on the GAP Analysis Form (Form # 2, 3, or 23) depending on the area of need (see Appendix A).
  - c. **Diagnostic:** Relatively lengthy (30-90 minutes), diagnostic assessments provide an in-depth assessment of targeted skills. These are formal instruments that break down individual student strengths and weaknesses in a particular skill area. Diagnostic assessments are administered less frequently and often to those students who struggle the most.
  - d. **Summative Assessments:** The state assessments are given as prescribed by the state and are administered in groups. This data is used for school, district, and/or state accountability purposes. These assessments give information about the overall effectiveness of instructional programs.
6. **Community Involvement:** When families, schools, and communities work together, children have a greater chance for success. Forming collaborative partnerships with families and communities is more than simply working together; it involves working together to achieve mutually desired, specifically outlined outcomes.
7. **Special Education and RTI:** IDEA 2004 states, “when determining whether a student has a specific learning disability ... a local educational agency shall not be required to take into consideration whether a student has a severe discrepancy between achievement and intellectual ability” ... a school “may use a process that determines if the student responds to scientific, research-based intervention as part of the evaluation procedures ...” (Section 1414(b)(6)). The Georgia Department of Education.
- a. Prior to, or as a part of the referral process, the student is provided appropriate, relevant research-based instruction and intervention services in regular education setting, with the instruction provided by qualified personnel; and
  - b. Data-based documentation of repeated assessments of achievement and/or measures of behavior is collected and evaluated at reasonable intervals reflecting systematic assessment of student progress during instruction; the results are then provided to the students’ parents.
  - c. If the student has not made adequate progress after an appropriate period of time during which the specified conditions have been implemented, a referral for comprehensive evaluation shall be considered, followed by an eligibility meeting to determine if the student needs special education and/or related services

## **Putnam County Charter School System Tiered RTI Model**

(Each school shall have a school-specific pyramid of interventions – see Appendix A pages 22-24)



*More than one intervention should occur at Tiers 2 and 3 if the initial intervention proves unsuccessful.*

## **Tier 1: Common Core or Benchmark Level** (see examples of all forms in Appendix A)

**Definition:** Standards-aligned instruction and school-wide foundational interventions are provided to **all** students in the general education setting using the Common Core Georgia Performance Standards (CCGPS) and researched interventions established at the various school levels. Tier I is also used to identify students who are making expected **grade level progress** (benchmark students) and demonstrating social competence in the standards-aligned system.

Tier 1 includes the curriculum, the core program, and the instruction that goes on in the regular classes; universal screening; and any other supplemental materials that are used with the core program or to support the curriculum. Instruction should be taking place at Tier 1 in such a way that it helps 75 to 80% of the student population meet grade-level standards. In other words, if a data review indicates that more than 25% of students seem to need Tier 2, Tier 3 or Tier 4 interventions, then changes need to be made to Tier 1.

All students will receive instruction in an empirically supported core curriculum (CCGPS)

According to research, typically, about 80% of students in a school will respond to a high-quality core curriculum and will make adequate progress throughout the year

Progress of all students is monitored at three to four points in time with “pre and post test” or “benchmarks,” during the Fall, Winter, and Spring of each school year. In addition to pre and post test assessments, the district will utilize results from SRI (Scholastic Reading Inventory), DIBELS, NEXT, STAR Reading, and STAR Math. Benchmark data indicate students who are not responding adequately to the core curriculum and who are in need of additional instruction

Positive Behavior Intervention Supports (PBIS) is the system wide support adopted by the district to develop social competence and a framework for a positive approach to discipline.

## **Tier 2: Supplemental or Strategic Level**

Tier 2 includes standards-aligned instruction with supplemental, small group instruction, which may include specialized materials. Tier 2 services are generally provided inside the regular classroom. However, in some cases this may not be appropriate. **Tier 2 is provided in addition to Tier 1.** In other words, students still attend and complete the work from the regular class. The selected interventions are provided **in addition to** the regular class and include:

Students who do not respond adequately (in a manner meeting promotion criteria) to the core curriculum based on benchmark assessments

A student intervention plan which is documented on **PCCSS Form 1** (Proficiency Plan with regular reviews)

A smaller group of students – Approximately 15% of the students in a school

Students who are considered “at-risk”

Students who are provided supplemental instruction/intervention (in addition to the core curriculum), which takes place about 2-3 times per week and often in small group formats using standard protocol interventions

More frequent progress monitoring: at least once weekly for at least two to three weeks (each separate intervention should have two to three data points to show progress was monitored and documented on **PCCSS Forms 2, 3, or 4 - Gap Analysis**) With parent permission, Tier 2 staff may also request a targeted screening to identify specific needs and possible interventions.

Most students at this level will make sufficient progress at this level and are “returned” to the Tier I level

To be determined by each school, students with At Risk levels of social competence will be referred to the School Counselor, CICO, or HUG club. Each administrator in conjunction with their PBIS committee will determine the level of referrals to be referred to Tier 2 intervention. Parent contacts are ongoing and are documented on **PCCSS Form 5.**

## **Tier 3: Intensive Level (Student Support Team)**

Tier 3 is also in addition to Tier 1. Therefore, a student who receives Tier 3 interventions/support also receives Tier 1 support (**everything that occurs in the regular class**). At the Tier 3 level, the student is added to the SEMS data base as a Tier 3 student. This level includes:



Teachers submit documentation to the designated RTI Coordinator to include:

Work samples –**PCCSS Form 8**

Copies of all Tier 2 Proficiency Plans and Gap Analysis forms

Students who do not respond adequately to core curriculum *or* Tier 2 strategic level interventions

Not more than approximately 5% of the students in a school who are considered in need of intensive intervention

High-quality, research-based interventions provided individually or in small groups (1:1-1:3 teacher to student ratio; interventions and decision making is documented on **PCCSS Form 1**-Proficiency Review Plan)

An individualized problem-solving model to drive instruction With parent permission, Tier 3 staff may also request a targeted screening to identify specific needs and possible interventions.

Student progress monitored more frequently: 1 to 2 times/week and documented on **PCCSS Form 2, 3, or 4**)

Changes made to the student's intervention plan based upon his/her progress toward a specified goal

Students with continued At Risk social competence will increase counseling time and a conference with parents for possible recommendation for referral to outside agency.

Students who make adequate progress at this level are returned to Tier II or Tier I level

For students who do not make adequate progress (in a manner meeting promotion criteria) at this level, RTI Coordinator will:

Submit a request for review to the School Psychologist who will add the student to the SEMS data base

Complete **SEMS** administrative data form

Use **SEMS** meeting summary & attendance for documentation for all meetings

Use **SEMS** for documenting intervention planning & monitoring

Complete **SEMS** eligibility tabs 1 through 4

Request **PCCSS Form 12** – Social History) and complete **PCCSS Form 21** – Communication

& upon approval obtain parent permission (**SEMS**), request a classroom observation (**PCCSS Form 7**), and complete the appropriate checklist (**PCCSS Form 13 or 14**).

## Tier 4: Special Education/Specialized Instruction

Tier 4 applies to students who meet who meet eligibility criteria for specialized instruction. Tier 4 may include gifted education services, ESOL, and/or special education and related services for eligible students. Within the school community, it applies to the parents of students receiving specialized services. Parents have certain rights and are invited to attend meetings, are part of the planning process, and as a member of the Eligibility Committee help determine what services, accommodations, and testing settings are needed. For special education this includes an IEP meeting, for ESOL students a Language Assessment Conference, and for Gifted students a Placement & Eligibility Team meeting.

At this level a system of procedures are put in place to make sure students are given the highest level of intervention and receive specialized instruction based on the individual needs of the students.

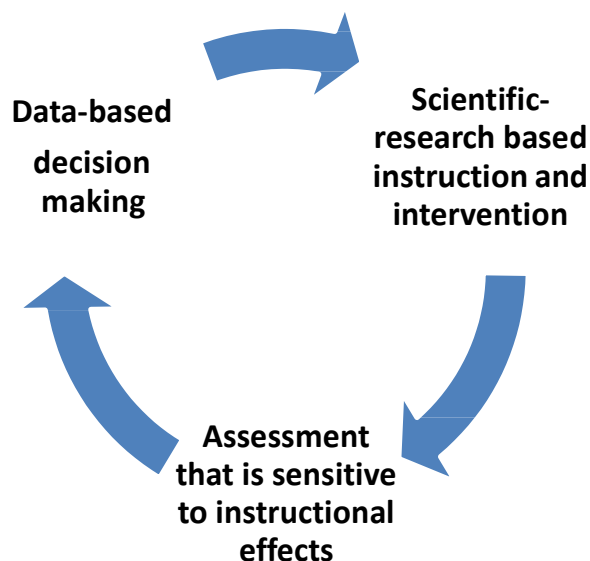
## RTI in Practice

There are three key features of RTI:

- Scientific or research-based instruction and intervention;
- Assessment of the effects of instruction (i.e., student response data based on frequent progress monitoring); and
- Data-based decision making (i.e., using the student response data as the basis for decision making).

Each feature is part of an interrelated process which should be applied to *every* student. Instructional practices are evaluated and adjusted based on results of reliable, valid, and sensitive indicators of important student outcomes. If any piece is missing, the process breaks down.





RTI represents a fundamental shift in how schools will go about identifying and responding to students' academic difficulties. Therefore, it is important to understand what RTI is and what it is not. RTI is more about *what* will be done than *where* it will be done. Also, it is more about *how* the job will get done and less about *who* will get it done. RTI requires educators to change how they view student difficulties and disabilities. RTI procedures turn attention *away* from identifying deficits within the student (e.g., processing difficulties) and *toward* evaluating student progress over time on the basis of age-based comparisons and rates of learning. Therefore, students' academic performance is compared to the performance of other students in their school or district and student learning is evaluated based on how quickly that student acquires instructed material. The effect of this shift is that it forces educators to focus on *how much* and *what types* of instruction students need, which increases accountability for student learning.

#### RTI is...

- About instruction
- An initiative that supports general education school improvement goals
- A method to unify general and special education in order to benefit students through a greater continuity of services
- Focused primarily on effective instruction to enhance student growth
- A system to provide instructional intervention immediately based on student need

#### RTI is not...

- Just about interventions
- A pre-referral system for special education
- An individual teacher, classroom, or class period
- Focused primarily on disability determination and documented through a checklist
- A method for just increasing or decreasing special education numbers

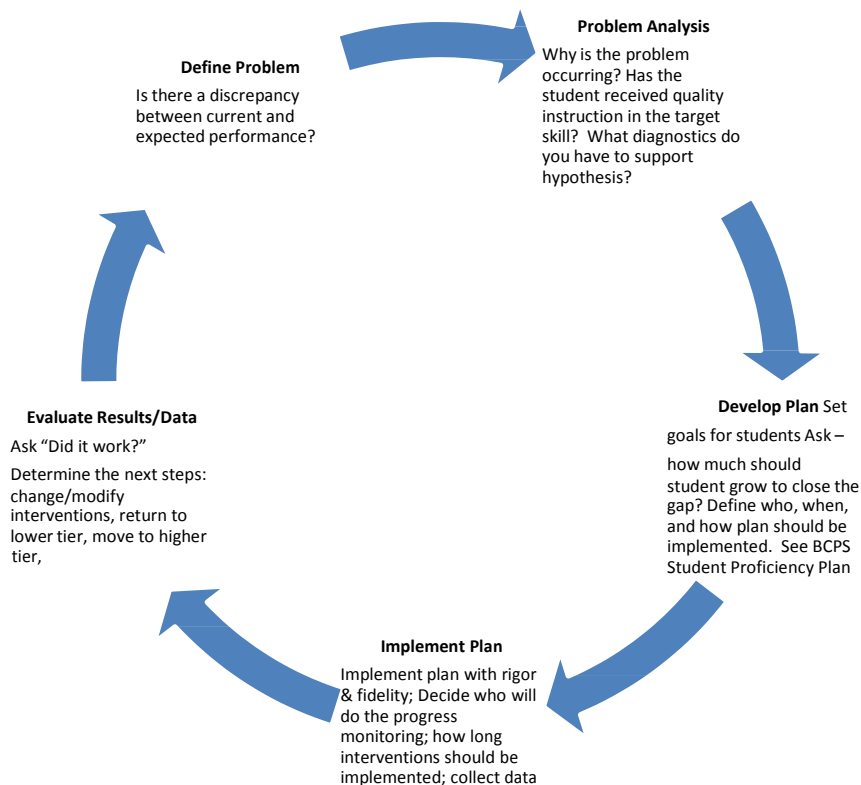
## Key Components

### Problem-Solving Team

Teams are composed of a variety of educational staff, including teachers, specialists, administrators, school psychologists, and consultants. Team members should include individuals who have a diverse set of skills and expertise that can address a variety of behavioral and academic needs.

## Problem-Solving Process

The importance of assessment and effective instruction for RTI cannot be overstated. However, the problem-solving model serves as the overarching structure which organizes assessment and intervention activities. Therefore, problem solving lies at the heart of RTI. Problem solving means going beyond fulfilling procedural requirements and checklists to doing what it takes to resolve students' learning problems. The problem-solving model has been organized into a series of cyclical steps.



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## Progress Monitoring

Progress monitoring is a systematic method for tracking and comparing individual or group performance through data collection. A consistent monitoring plan is essential to determine the effectiveness of instructional programs and interventions. Progress toward meeting the student's goals is measured by comparing expected and actual rates of learning. Based on these measurements, teaching is adjusted as needed. Thus, the student's achievement progression is monitored while instructional techniques are adjusted to meet the individual student's learning needs.

To understand progress monitoring, it is important to understand key terminology:

- **Benchmarks:** Expected rates of growth or learning. Usually measured three times per year (Fall, Winter, Spring)
- **Baseline:** The initial performance taken on a student is often the median score of three baseline data points. The baseline serves as the reference point for all future data collection.
- **Aim lines:** Also referred to as the goal line, the aim line depicts the anticipated growth and offers a comparison for the trend line. The aim line is typically shown as the expected rate of progress toward either the district goal or a goal developed by the problem-solving team.
- **Trend line:** Indicates the actual rate of improvement; provides insight into future performance (will he/she meet the goal?).

## Curriculum Based Measurement

CBM is designed to measure skill fluency in early reading literacy, oral reading, writing, and math computational skills. These brief probes (typically administered in 1 to 3 minutes) are used to monitor both the student's level of performance and his or her rate of performance growth related to age or grade-level expectations. CBM is a form of progress monitoring and is not considered diagnostic in nature. CBM probes are administered and scored using standardized methodology and are a valid and reliable method to develop district, school, or classroom level norms.

## Pre, Post and Benchmark Assessments

PCCSS administers pre, post and benchmark assessments (Test Gate) on standards, Lexile (SRI) and Math numeration (STAR). These formative assessments are used to pre plan for instruction and assess student achievement after delivery of instruction.

## Data-Based Decisions

The most important part of progress monitoring is not just collecting data; it is *using* the data to make sound instructional decisions. Schools must look at the data regularly, implement decision-making rules, and use the data continuously to inform instruction.

Within the tiered continuum of service delivery, decision rules are necessary for adding or removing tier level student support as educators address their needs for intervention delivery and eligibility decisions. These decision rules must rely on pertinent student assessment data and current promotion criteria. At each step of the process, good decision rules ensure effective, equitable, and fair treatment for all students. The PCCSS have developed these specific guidelines for data-based decisions:

- **Cut scores for determining risk status:** To identify students who are at risk, each teacher, school and system will use local comparative data from student performance on the pre, post and benchmarks from each grade level. Typically this cut score is those scoring at or below the 25<sup>th</sup> percentile. For the PCCSS system, each school will establish cut scores.
- **The frequency and duration of progress monitoring:** During Tier 2 and Tier 3 service delivery, the frequency and duration of progress monitoring will have an impact on whether sufficient data has been collected to determine a student's responsiveness to intervention. First, data must be collected with sufficient frequency to detect changes in performance following instruction/intervention. It should be no less frequent than one time per week at each Tier. Second, the length of the data collection period during intervention must be established. This may be determined by the specific intervention being used (as outlined in the intervention manual). A minimum of four weeks of intervention should be delivered. The length of time should allow for no fewer than six data points during an intervention phase. As with any test, the more data gathered, the more reliable the decision will be about whether a student is responding to an intervention. Students that are already receiving Gifted or ESOL services should still follow the steps in the Tier process and should be provided interventions and progress monitoring as needed. If the additional services are not yielding results then a meeting should be held which includes the students gifted or ESOL teacher. As to the timeline, professional judgment is critical. Crisis placements are available, but are to be used sparingly and should be based on solid information.
- **Criteria for determining a student's responsiveness to intervention:** Determination of whether students are responding to interventions requires specifying decision rules based on students' levels and rates of progress, both prior to and after the initiation of intervention delivery. This is established through trend line comparisons (or gap analysis), which will be explained later.

### Understanding Norms

Data can be used to compare student performance to the typical student in specific academic or behavioral skills.

- **Local Norms:** Involves sampling the abilities of students at specific grade levels in a school or district.
- **National Norms:** Involves sampling the abilities of students nationally, or based on research collected over time.

## Setting Ambitious and Realistic Goals

As discussed earlier, an important part of a problem-solving process is setting goals or expected criteria for the students to obtain. Setting goals that are realistic yet challenging is crucial to making good on-going decisions within a problem-solving model.

Goal setting can be done at the group as well as at the individual level. For example, in an RTI model, it is expected that the implementation of a high quality, scientific, research-based instructional program implemented with fidelity at Tier 1 should result in successful outcomes for at least 80% of all students (National Association of State Directors of Special Education, 2005). When universal screening data find substantially fewer students successfully meeting benchmarks, the indication is that changes are needed in the delivery of the core program (within Tier 1) to improve outcomes for all students; this must be done before a determination could be made of the degree to which supplemental instructional programs at Tier 2 are impacting outcome. As such, problem-solving teams may put in place goals that reflect a focus on improving the school-based outcomes of student performance within the core program.

At the individual level, when students are identified through an RTI process as at-risk (and the core program is implemented with fidelity), it is critical that goals be established for the individual student so that the outcomes of his or her progress can be measured against appropriate expectations. By setting goals and monitoring a student's progress toward those goals, the impact of instruction can be assessed in an ongoing manner, and adjustments in instruction and goals can be made as the instruction is proceeding. Keep in mind that *the ultimate goal is to close the achievement gap and meet the academic expectations established by PCCSS*.

A key element of effective goal setting, whether used at the group or individual level, is the establishment of benchmarks specifying the minimal expected performance for all students. The rate of improvement (ROI) or slope is a key indicator that sets the criterion against which student performance will be compared. Closing the gap for those students whose starting point is below benchmark would be a critical goal for teams to consider.

### Steps for Setting Goals

1. Identify a starting point (or baseline)
2. Identify a goal or benchmark (target) / promotion criteria
3. Subtract current (baseline) level from target
4. Divide by number of weeks left until target
5. This will be your rate of improvement (ROI) to meet goal
6. Compare student's ROI with a typical, or average, ROI for that student's grade level.
7. Ask: Is this goal *realistic*? (With interventions, is this a goal that's possible to attain?)
8. Ask: Is this goal *ambitious*? (With interventions, will this goal allow for the gap to close or will the student simply not fall any further behind?)
9. If necessary, adjust the goal

**Goals must be monitored and may be adjusted based on student progress.**

**End of Year Target – Current Score = Amount of growth to close gap**

**Amount of Growth = Weekly Target**  
**Number of weeks**

### Trend line or Gap Analysis

Having a consistent decision-making rule is crucial to monitoring progress. There are many established ways to analyze trend lines, including slope comparisons, the trend line rule (Tukey method), and the four-point rule. Comparing slopes of the aim line and trend line is most accurate, followed closely by the trend line rule. However, both of these methods are time consuming. The four-point rule is fairly simple to implement. It is easy for teachers to look at the data.

- Trend line rule: Calculated by dividing the data points into three equivalent sections. The median scores from the first section and last section are marked and connected by a line. This is the trend line.

- When we compare that trend line to the goal line, if the trend line is steeper we want to raise the goal or move the student back to the prior Tier
- If the trend line is consistently around the goal line, continue interventions. This may be an indicator that the intervention is working but maintenance of the skill has not been established.
- If the trend line is decreasing or “flat-lined,” it is time to reevaluate or change interventions.
- Four-point rule: This rule is a quick but less accurate method of gap analysis, based on the 4 most recent consecutive data points
  - If the 4 data points are all ABOVE the goal line, keep the current intervention and increase the goal or move the student to the prior Tier
  - If the 4 data points are all BELOW the goal line, keep the current goal and modify the intervention
  - If the 4 data points are not consistently above or below the goal line, maintain the current goal and intervention and continue collecting/reviewing data

Each school’s problem-solving teams will be provided an excel spreadsheet which will chart and calculate aim lines and trend lines for each student; the Gap Analysis goal for each area at each school will be the designated county standard promotion criteria with intermediate/short term goals calculated and listed on the analysis form (**See Appendix A PCCSS Forms 2, 3, or 4**).

## Instruction & Intervention

To increase the opportunity for success at all levels within the RTI framework, instruction and interventions delivered to students should be supported by evidence of their effectiveness. A clear distinction is made between instructional strategies and interventions. A strategy is a tool, plan, or method used to guide and improve student learning. These strategies are more commonly referred to as differentiated instructional tools and practices.

A research-based intervention is one that is school-based, prescriptive, and has a clear record of success. RTI requires programs and interventions that have been validated in educational research. EIP and after school tutoring are not scientific based interventions. EIP and after school tutoring is the place where interventions are implemented (i.e. Head sprout lessons, Alphabetic Phonics, Guided Listening). These are interventions on which data collection is based. EIP and after school are a PLACE to receive the intervention, just like the classroom. In essence, the following questions must be asked:

- Has the study been published in a peer-reviewed journal or approved by a panel of independent evaluators?
- Have the results of the study been replicated by other scientists?
- Is there consensus in the research community that the study’s findings are supported by a critical mass of additional studies?

### *Guidelines for Minimally Acceptable Interventions*

1. Interventions are chosen based on classroom factors and reasonableness for the situation and severity of the problem.
2. Scientific evidence for the effectiveness of the interventions must exist.
3. Interventions are chosen based on students’ instructional needs (and not merely on availability or convenience). This guideline means that individual student data justifies the choice of intervention(s).
4. A pre-specified, structured, and organized plan for each intervention session.
5. Interventions should increase in intensity (i.e., frequency, length of intervention sessions, change in intervention strategies) in the event that a student does not make adequate progress as determined by the goal level established through the problem solving process (according to the criteria described in the previous section on data-based decision making).
6. Unless a crisis situation or professional judgment dictates otherwise, there should be a minimum of 4 weeks of intervention sessions (and 6 data points) before a determination of effectiveness is made, unless the guidelines of the intervention specify otherwise.
7. Intervention sessions should be carried out as prescribed and there should be evidence that they were carried out as planned. Evidence can include training, permanent products, and direct observation by an independent party.
8. There should be a minimum of two phases of intervention (based on decision criteria described in the previous section on data-based decision making) before moving a student to Tier 3 or making a referral for a special education evaluation.

Although evidence supporting an intervention's effectiveness is important, the intervention itself is only as good as the accuracy and consistency with which it is implemented. Fidelity refers to the degree to which interventions are implemented as planned. It is essential that safeguards be put into place to determine if those interventions are being carried out as they were intended. A student's responsiveness to an intervention may eventually be used in special education eligibility decision making. Therefore, school personnel must be confident that the intervention was performed with high levels of fidelity. Regular monitoring of intervention delivery through observations and checklists is integral to ensuring that the interventions continue to be implemented correctly and accurately (i.e., with "fidelity") and that they continue to benefit those whom they are intended to serve. Fidelity should be directly monitored by an independent observer other than the interventionist; in Putnam County Schools this assignment is determined by the SST/Tier 3 Committee with input from a school administrator.

## Instruction and Intervention Factors to Consider at all Tiers

- Were the programs and interventions supported by scientific research?
- Were standard treatment protocols followed for the interventions with students?
- Were the interventionists trained in delivering the intervention with fidelity?
- Were the interventions delivered for a sufficient amount of time?
- Was a team used to help design and support the intervention(s)?

## Implementation of RTI

The following guide may assist in implementing the RTI model with fidelity and enhancing consistency across the district. Although instructional programs and pyramids of interventions may vary among schools, the key components of the problem-solving process need to be included in each building.

### Tier 1

- The curriculum should be aligned with core content.
- Research-based programs should be implemented with fidelity and rigor to address core instruction.
- Three times per year, all students are assessed using the district-wide assessment tool or district learning check. This is considered progress monitoring at Tier 1.
- Problem-solving must take place *at the core* if less than 80% of students are at benchmark, based on district learning checks.
- Teachers are responsible for execution of the core program and differentiated instructional practices.
- Teachers should be supported by grade-level and school based teams that discuss and analyze data and brainstorm strategies that will address the needs of all learners.
- Teachers and families should communicate about student progress in the curriculum.

### Tier 2

- Once students are identified as being at-risk, or falling below district benchmark, the problem-solving process is initiated
- Teachers may opt to include in the At-Risk "pool" students who met district benchmarks, if there is sufficient data to support this decision.
- Teachers gather all relevant pieces of diagnostic and classroom data to reference during the problem-solving team meeting.
- The team works through the problem-solving process and determines if the student will require intervention to meet the next district benchmark
- If yes, the school will develop a student proficiency plan (documented on **PCCSS Form 1** Proficiency Plan & Review) and parents are notified. Special factors to be considered include:
  - Goal
  - Intervention
    - Method of delivery
    - Frequency



- Intensity
  - Duration
  - Any adjustment in schedule?
  - What resources are available or what training may be needed?
- Progress monitoring tool & frequency (at least once per week)
- Next review date?
- Continue parent communication, informing them of the intervention and progress (**PCCSS Form 5**)
- At each review of the progress monitoring data and the SPP, all data should be documented on A gap analysis must be completed at least monthly to determine if the goal is being met (**PCCSS Form 2, 3, 23, or 4 for pre-k**).
  - If goal is being met:
    - Raise the goal but continue the intervention?
    - Stop the intervention and move student back to Tier 1?
    - It is perfectly acceptable to continue with Tier 2 services for a prolonged period of time if that is what the student needs. For most students the team will want to think about how they can get a student ready for Tier 1 without the Tier 2 services over time (scaffold away the support). However, there may be a handful of students who will need Tier 2 for a prolonged period.
  - If goal is not being met:
    - Review problem-solving process
    - Change interventions?
    - Increase frequency of intervention?
    - Increase intensity of intervention?
    - If this intervention is the second intervention attempted, the team may consider whether moving the student to Tier 3 is appropriate.

### Tier 3

- If a student moves to Tier 3, the problem-solving process is executed identical to Tier 2, although the intervention and progress monitoring may increase in intensity and frequency.
- As with Tier 2, it is imperative to review progress monitoring data to make decisions about student progress.
- A gap analysis should be completed at least every two weeks. (**PCCSS Form 2, 3, 23, or 4 for pre-k**).
  - If the goal is being met:
    - Raise the goal but continue the intervention?
    - Decrease the intervention and move student back to Tier 2 or Tier 1?
  - If the goal is not being met:
    - Review problem-solving process
    - Change interventions?
    - Increase frequency of intervention?
    - Increase intensity of intervention?
    - If this intervention is the second intervention attempted, the team may consider a special education referral for a comprehensive evaluation (**see Checklist Forms PCCSS 13 or 14**)

Procedures in the event RTI guidelines as outlined in this manual are not followed:

1. Upon referral from Tier 2, the RTI coordinator will review all intervention data
  - a. Accept the referral and set up a Tier 3 review
  - b. Return the referral and provide professional development in the deficient area(s)
  - c. If problems persist following professional development, the RTI Coordinator will request consultation with building administrator who will provide written documentation of deficiencies along with a corrective action plan.
2. Upon referral from Tier 3, the School Psychologist will review all intervention data
  - d. Accept the referral and arrange for a full evaluation
  - e. Return the referral and provide professional development in the deficient area(s)



- f. If problems persist following professional development, the School Psychologist will request consultation with the building administrator who will provide written documentation of deficiencies along with a corrective action plan.

The ultimate responsibility for the RTI process lies with the building level principal. Principals should monitor instructional staff for areas in which too few or too many referrals are being made.

#### **Tier 4**

- An Individual Education Plan (IEP) will be developed for the student.

It should be noted that some students may always require Tier 2 or Tier 3 interventions to be successful in the core program and meet expected benchmarks. These students are not otherwise identified as receiving special education services, given that special education is reserved for those who have identified disabilities.

### **Special Considerations in RTI**

**Gifted & Talented** -A tiered model of programming is a historical framework for the field of gifted and talented education. Students who are gifted require special provisions because of their strengths and above-grade instructional level or potential. Given that RTI supports setting targets or trend lines for individual students, long term planning and monitoring of student progress allows students to learn and grow toward accelerated expectations.

**Students with Individual Education Plans** - Because RTI encompasses all students, students with IEP's should always be considered to be part of the four-tiered model. It is imperative to include special education staff in the problem-solving process in order to review student eligibility, individual goals and objectives, and accommodations/modifications on the IEP. Please reference [Appendix C](#) for a flowchart when a student with an IEP is identified as At-Risk on the district benchmark.

**ESOL Students** – – Upon enrollment, any child whose enrollment form lists a language other than English, is scheduled for a language screener & consideration for ESOL. The Wide Access Placement Test is given to determine language proficiency. EL students are also considered part of the four-tiered model. Although students are receiving ESOL services or may be monitored by the district for two years after exiting, if not successful they still need additional consideration through the tiers. The ESOL teacher should be an integral part of the meeting process and should provide strengths and weaknesses for the EL students. Documentation of differentiated instruction for EL should be noted in teacher lesson plans.

**Referral for Individual Evaluation for Special Education Services** - For students who do not make adequate progress on their Proficiency Review Plans (PRP), the problem-solving team may consider a referral for an evaluation for special education services. The data collected in the RTI process shall be considered by the Department of Special Programs and Exceptional Students as part of the referral process. Refer to referral procedures for special education for more information.

## KEY TERMS & ACRONYMS

**College and Career Ready Performance Index:** A statewide accountability system mandated by the ESEA of 2001 which requires each state to ensure that all schools and districts make Adequate Yearly Progress as defined by states and approved by the US Department of Education

**Aim line:** Line on a graph that represents expected student growth over time; goal line.

**Benchmark assessments:** Short assessments given at the beginning, middle, and end of the year to establish baseline achievement data and progress

**Charting:** A visual depiction of the student's performance data, relative to the baseline and aim line which includes baseline data, aim line, progress monitoring data, and trend lines (see GAP Analysis PCCSS Forms 2, 3, 4, or 23).

**Core principles** of RTI necessary for RTI processes to be effective:

- All students can learn
- Early intervention for struggling learners is essential
- Use of a multi-tier model of delivery is necessary
- Utilization of a problem-solving methodology

**Curriculum-Based Assessment (CBA):** Measurement that uses direct observation and recording of a student's performance in the local curriculum as a basis for gathering information to make instructional decisions

**Curriculum-Based Measurement (CBM):** CBM is a method for monitoring student progress through a curriculum. It reflects the success of students' instructional program by using short, formative assessments that are normed.

**Data-based decision making:** A process in which school personnel engage in ongoing analysis of data from multi-level sources to provide a comprehensive picture of strengths and challenges and develop a plan to prioritize and address those challenges.

**Data points:** Points on a graph that represent student achievement or behavior relative to a specific assessment at a specific time

**Dimensions of reading:** The five research based dimensions of reading as outlined in the Elementary and Secondary Education Act of 2001 (NCLB)

- Phonemic Awareness
- Phonics
- Fluency
- Vocabulary
- Comprehension

**Differentiated instruction:** Process of designing lesson plans that meet the needs of the range of learners. Such planning includes learning objectives, grouping practices, teaching methods, varied assignments, and varied materials chosen based on student skill levels, interest levels, and learning preferences. Differentiated instruction focuses on instructional strategies, instructional groupings, and an array of materials.

**Discrepancy:** Difference between two outcome measures

- IQ-Achievement discrepancy – difference between scores on a norm-referenced i.e. intelligence test and a norm-referenced achievement test
- Difference between pre-test and post-test on a criterion-referenced test

**Dual discrepancy:** A dual discrepancy occurs when a student's performance and growth rate are both substantially below performance and growth rate of typical peers

**Duration:** The length of time over which a student receives an intervention (e.g., 15 weeks)

**Essential components of an RTI process:** Core components of an effective RTI process

- School-wide screening
- Progress monitoring
- Tiered services
- Fidelity of implementation

**ESOL:** The services provided to students identified as English Learner's. Students are served in either a pull out or push in model served by an ESOL certified teacher.

**Evidence-based practice:** Educational practices/instructional strategies supported by relevant scientific research studies

**Fidelity of treatment:** Implementing a program, system or intervention exactly as designed so that it is aligned with research and ensures the largest possible positive outcome

**Formative assessment/evaluation:** Classroom/curriculum measures of student progress; monitors progress made towards achieving learning outcomes; informs instructional decision making

**Frequency:** The number of times a student receives an intervention in a given timeframe (e.g., daily, twice weekly)

**General Outcome Measure:** A quick and reliable indicator of academic performance in such areas as reading, math, and written expression

**Goal:** Standard against which progress can be compared and allows for an aim line to be established. Possible goals could be established based on the following:

- Norms
- Percentile cutoff
- Growth rates
- Local growth rates

**Goal Line:** See Aim line

**Graph:** Provides a visual representation of a large amount of data

**Growth rate:** Gives you a growth expectancy for each week of school year; Allows for obtaining student's baseline then monitoring progress while comparing to growth expectancy

**ICEL:** Instruction, Curriculum, Environment, Learner (domains of influence in problem-solving)

**IDEA** - Individuals with Disabilities Education Improvement Act of 2004; Original passage in 1975; latest reauthorization in 2004; federal statute relative to public education and services to students with disabilities ages 3 through 21

**Intensity:** The length of time during which a student receives an intervention (e.g., 30 minutes)

**Intensive interventions:** Academic and/or behavioral interventions characterized by increased length, frequency, and duration of implementation for students who struggle significantly; often associated with narrowest tier of an RTI tiered model; also referred to as tertiary interventions/TIER 3.

**Interventions:** Instructional strategies and curricular components designed to improve or remediate a certain set of skills

**Key practices in RTI:** Practices necessary for RTI processes to be effective

Using research-based, scientifically validated instruction and interventions

Monitoring of student progress to inform instruction

Making decisions based on data

Using assessments for universal screening, progress monitoring, and diagnostics

**LEA:** Local Education Agency: Refers to a specific school district or a group of school districts in a cooperative or regional configuration

**Learning Checks:** See Universal screening

**Learning Disability/Specific Learning Disability (SLD)** [*from federal regulation §300.309(a)(1)*]: The student does not achieve adequately for the student's age or to meet State approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the student's age or State-approved grade level standards:

(i) Oral expression.

(ii) Listening comprehension.

(iii) Written expression.

(iv) Basic reading skills.

(v) Reading fluency skills.

(vi) Reading comprehension.

(vii) Mathematics calculation.

(viii) Mathematics problem solving (math reasoning)

**Learning rate:** Average progress over a period of time, i.e. one year's growth in one year's time

**Mean:** The average of a data distribution; (the sum of scores divided by the number of scores)

**Median:** The middle score in a data distribution.

**NCLB/ESEA – No Student Left Behind/Elementary and Secondary Education Act**

**Normative scores:** Scores that provide information about how a student performed relative to some comparison group (classroom, school, district, state, or national)

**ORF:** Oral Reading Fluency; words read correctly in one minute

**Percentile rank:** A number assigned to a score that indicates the percentage of scores found below that score.

**Primary levels of intervention:** Interventions that are preventive and proactive; implementation is school-wide or by whole-classroom; often connected to broadest tier (core or foundational tier) of a tiered intervention model/TIER 1.

**Problem-solving model (PSM):** Solutions to instructional and behavioral problems are addressed by going through a four-step process: (problem identification, problem analysis, plan implementation, and plan evaluation); is sensitive to individual student differences; depends on the fidelity of implementing interventions

**Problem-solving team:** Group of teachers and school staff who meet regularly to help design interventions for and monitor progress of students who are at-risk for failure

**Progress monitoring:** Data used to frequently check student progress towards success; Progress monitoring is a scientifically based practice that is used to frequently assess students' academic performance and evaluate the effectiveness of instruction. Progress monitoring procedures can be used with individual students or an entire class.

**Quartile:** One-fourth of a distribution of scores

**Remediation:** Instruction intended to remedy a situation; to teach a student something that he or she should have previously learned or be able to demonstrate; assumes appropriate strategies matched to student learning have been used previously

**Response to Intervention / Response to Instruction / Responsiveness to Intervention (RTI):** Practice of providing high quality instruction and interventions matched to student need, monitoring progress frequently to make changes in instruction or goals and applying student response data to important educational decisions

**RIOT:** Review, Interview, Observe, and Test; Information collected as part of the RTI problem-solving process, in order to develop an intervention

**Scientifically-based/Research-based interventions:** Instructional strategies and curricular components used to enhance student learning. The effectiveness of these interventions is backed by experimental design studies that

- Use empirical methods

- Include rigorous and adequate data analysis

- Have been applied to a large study sample

- Are replicable

- Show a direct correlation between the interventions and student progress, and

- Have been reported in a peer-reviewed journal

**Scientific/Research-based instruction:** Curriculum and educational interventions that have been proven to be effective for most students based on scientific study

**Screening** – See Universal screening

**SEA:** State Education Agency, refers to the department of education at the state level

**Slope:** Rate of growth or improvement in performance over time

**Specific Learning Disability:** See Learning Disability

**Standard protocol intervention:** Use of same empirically validated intervention for all students with similar academic or behavioral needs; facilitates quality control

**Strategic interventions:** Intervention chosen in relation to student data and from among those that have been documented through educational research to be effective with like students under like circumstances; often associated with second tier of an RTI tiered model; also referred to as secondary interventions/TIER 2.

**Summative assessment/evaluation:** Comprehensive in nature, provides accountability and is used to check the level of learning at the end of a unit of study. **Systematic data collection:** Planning a timeframe for and following through with appropriate assessments to set baselines and monitor student progress

**TIER 1, TIER 2, TIER 3:** See Primary Levels of Intervention, Strategic Levels of Intervention, Intensive Interventions

**Tiered instruction:** Levels of instructional intensity within a tiered model

**Tiered model:** Common model of three or more tiers that delineate levels of instructional interventions, based on student skill need

**Trend line:** Line on a graph that connects data points; compare against aim line to determine responsiveness to intervention

**Learning Focused:** Learning-Focused is a comprehensive continuous school improvement model that: provides schools with consistent learning, provides exemplary strategies instruction and integrates research-based exemplary practices.

**Universal screening:** A process of reviewing student performance through formal and/or informal assessment measures to determine progress in relation to student benchmarks; related directly to student learning standards. Those students whose test scores fall below a certain cut-off are identified as needing more specialized academic interventions. Universal screening usually takes place three times/year (Fall, Winter, Spring)

**Validated intervention:** Intervention supported by education research to be effective with identified needs of sets of students

**Reading RTI - Primary School Model (each school modifies to fit developmental levels)**

**TIER 3**

**Intensive, Individualized Interventions Targeted  
Instruction based on SPECIFIC needs (problem  
solving approach)**

EIP Responsible (groups 1-3)

Interventions determined by SST committee

**TIER 2**

**Targeted Group Interventions**

**Targeted Instruction based on AREA of need (standard protocol approach)**

**TEACHERS  
WILL...**

- Fill out  
SPP  
- Conduct  
intervention  
- Progress  
monitor (via  
DIBELS)  
- Complete  
SPP Review  
- Get fidelity  
check

If above steps  
completed  
and  
intervention  
unsuccessful,  
refer to EIP  
via EIP entry  
form

Intervention #1: Teacher Responsible  
(2-3 days a week)

Basic Reading Skills – (phonological  
awareness, phonics)

Lexia

Headsprout (ESOL/SPED)

Fluency – w/ trained student/volunteer

Assisted Reading Practice

Listening Passage Preview

Paired Readings

Repeated Readings

Timed Readings

Comprehension – Story Maps

Comprehension Cards

Intervention #2: EIP Responsible  
(groups of 6-8, 5 days a week)

PALS

Tyner

Read Well (2<sup>nd</sup> grade, if needed)

FCRR

U. of Mississippi Interventions

Road to the Code

I've DIBELed Now What?

\*Fidelity check completed during administration  
observation

If intervention #2 is unsuccessful,  
refer to Tier 3. You will need:

SPP/SPP Reviews, Progress Monitoring  
(DIBELS graphs/gap analysis), Student History,  
Parent Communication, Work Samples,  
Vision/Hearing Screening, Report Card, Request  
for Tier 3 meeting

Teachers  
must try  
one  
intervention  
and  
progress  
monitor in  
the  
classroom  
before EIP  
is an  
option.

Fidelity  
checks will  
be  
completed  
by a Tier 3  
committee  
member  
before EIP  
is  
considered.

**TIER 1 Core Instruction - What all teachers are expected to do**

Standards-based instruction

Small group instruction

Re-teaching

Remediation/Enrichment

Acceleration

Differentiated instruction

Flashcards / Extra practice

Informal tutoring with untrained parent/peer

Homework (including extra/individualized homework)

**Research Based Strategies** (including: direct and  
explicit instruction, fast paced lessons, corrective  
feedback, modeling, multiple practice opportunities,  
scaffolding, review, clear procedures/lesson structure,  
etc.)

**Learning Focused Strategies** (including:  
activating strategies, assessment prompts,  
collaborative pairs, essential questions, graphic  
organizers, differentiated assignments, vocabulary  
instruction, summarizing strategies, etc.)

\*\*\* Tier 1 issues are generally related to isolated skills, rather than groups of skills. When students are missing a few skills, it can

**Math RTI - Primary Model (each school modifies for developmental levels)**



<div>TIER 3</div> <div>Intensive, Individualized Interventions</div> <div>Targeted <u>Instruction</u> based on SPECIFIC needs (problem solving approach)</div> <div>EIP Responsible (groups 1-3); Interventions determined by SST committee.</div>					
<div>TEACHERS WILL...</div> <div>- Fill out SPP</div> <div>- Conduct intervention</div> <div>- Progress monitor (via DIBELS)</div> <div>- Complete SPP Review</div> <div>- Get fidelity check</div> <div>If above steps completed and intervention unsuccessful, refer to EIP via EIP entry form</div>	<div>TIER 2</div> <div>Targeted Group Interventions Targeted <u>Instruction</u> based on AREA of need (standard protocol approach)</div> <table><tr><td><div>Intervention #1: Teacher Responsible (2-3 days a week)</div><div><u>Number Sense-</u></div><div>Great Number Line Race</div><div>Strategic Number Counting Instruction</div><div>Number Race (computer)</div><div>Number Catcher (computer)</div><div><u>Math Facts-</u></div><div>Cover, Copy, Compare</div><div>Incremental Rehearsal</div><div>Constant Time Delay</div><div>Easy/Hard Problems interspersed</div><div><u>Problem Solving-</u></div><div>Self-Monitoring</div><div>Self-Correction</div><div><u>Graphs-</u></div><div>Question-Answer-Relationships (QAR's)</div></td><td><div>Intervention #2: EIP Responsible (groups of 6-8, 5 days a week)</div><div>PALS</div><div>Meta-cognitive Strategies</div><div>Strategic Math Series (available for purchase, cheap but good!)</div><div><a href="http://www.kucrl.org/sim/strategies/math.shtml">http://www.kucrl.org/sim/strategies/math.shtml</a></div><div>*Fidelity check completed during administration observation</div><div>If intervention #2 is unsuccessful, refer to Tier 3. You will need: SPP/SPP Reviews, Progress Monitoring (DIBELS graph/Gap Analysis), Student History, Parent Communication, Work Samples, Vision/Hearing Screening, Report Card, Request for Tier 3 meeting</div></td></tr></table>		<div>Intervention #1: Teacher Responsible (2-3 days a week)</div> <div><u>Number Sense-</u></div> <div>Great Number Line Race</div> <div>Strategic Number Counting Instruction</div> <div>Number Race (computer)</div> <div>Number Catcher (computer)</div> <div><u>Math Facts-</u></div> <div>Cover, Copy, Compare</div> <div>Incremental Rehearsal</div> <div>Constant Time Delay</div> <div>Easy/Hard Problems interspersed</div> <div><u>Problem Solving-</u></div> <div>Self-Monitoring</div> <div>Self-Correction</div> <div><u>Graphs-</u></div> <div>Question-Answer-Relationships (QAR's)</div>	<div>Intervention #2: EIP Responsible (groups of 6-8, 5 days a week)</div> <div>PALS</div> <div>Meta-cognitive Strategies</div> <div>Strategic Math Series (available for purchase, cheap but good!)</div> <div><a href="http://www.kucrl.org/sim/strategies/math.shtml">http://www.kucrl.org/sim/strategies/math.shtml</a></div> <div>*Fidelity check completed during administration observation</div> <div>If intervention #2 is unsuccessful, refer to Tier 3. You will need: SPP/SPP Reviews, Progress Monitoring (DIBELS graph/Gap Analysis), Student History, Parent Communication, Work Samples, Vision/Hearing Screening, Report Card, Request for Tier 3 meeting</div>	<div>Teachers must try one intervention and progress monitor in the classroom before EIP is an option.</div> <div>Fidelity checks will be completed by a Tier 3 committee member before EIP is considered.</div>
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**TIER 3\***

**Intensive, Individualized Interventions**  
**Targeted Interventions based on SPECIFIC needs**  
**(problem solving approach)**

Interventions determined by SST committee

**TIER 2\***

**Targeted Group Interventions Targeted**  
**Instruction based on AREA of need (standard**  
**protocol approach)**

ABE tutorials

HUG club

Check and Connect (SPED)

Behavior Contract

Mystery Motivator

Points for Grumpy

Attention Seeking –

Non-contingent Reinforcement (Random teacher attention)

<http://www.interventioncentral.org/behavioral-interventions/challenging-students/school-wide-strategies-managing-defiance-non-compliance>

Motivation –

<http://www.interventioncentral.org/behavioral-interventions/motivation>

On-Task –

Rubber Band Intervention

Self-monitoring

<http://www.interventioncentral.org/behavioral-interventions/challenging-students/school-wide-strategies-managing-task-inattention>

Hyperactivity –

Self-monitoring

<http://www.interventioncentral.org/behavioral-interventions/challenging-students/school-wide-strategies-managing-hyperactivity>

**TIER 1\***

**Core Instruction - What all teachers are expected to do**

<http://www.interventioncentral.org/behavioral-interventions/challenging-students/teacher-behavioral-strategies-menu>

Positive Behavioral Interventions and Support (PBIS)

“Behavior Barometer”

Skillstreaming

Bucketfillers

Character Cards

Class-wide and Individual Incentives/Rewards

\*Tiers depends on response to intervention AND severity of behavior (i.e. danger to self or others).

## STUDENT PROFICIENCY PLAN/PROGRESS MONITORING

Date of initial plan: \_\_\_\_\_

**Student:** \_\_\_\_\_ **DOB** \_\_\_\_\_

**Grade level:** \_\_\_\_\_ **School:** Head Start/PCPS/PCES/PCMS/PCHS / Private School \_\_\_\_\_

**Referring Teacher:** \_\_\_\_\_ / **EIP Teacher:** \_\_\_\_\_

**Area of Concern:** reading fluency/basic reading/reading comprehension/basic math/math reasoning/  
listening comprehension/oral expression/behavior/other \_\_\_\_\_

**Baseline Data** (quantitative): \_\_\_\_\_

**Promotion Criteria** (na if behavior): \_\_\_\_\_

**Growth needed per quarter to meet promotion criteria**(na if behavior): \_\_\_\_\_

**Staff responsible for progress monitoring:** \_\_\_\_\_

**Fidelity Checklist to be monitored by:** \_\_\_\_ Tier 2 or 3 Team Member \_\_\_\_\_

**Next review date:** \_\_\_\_\_

**Other Discussion Items:**

FIDELITY CHECK includes:

- \_\_\_\_ intervention program is based on research
- \_\_\_\_ standard treatment protocols are followed
- \_\_\_\_ staff are trained as needed
- \_\_\_\_ intervention is delivered for a sufficient period of time
- \_\_\_\_ decision are made by a team

**List all team members included in Tier 2 decision making:**

DO NOT SUBMIT for referral unless this form is complete; PROGRESS MONITORING COLUMN **MUST HAVE QUANTITATIVE DATA with minimum of 4 data points**

<b>Intervention # 1</b>	Dates	Progress Monitoring Data	Progress sufficient to meet promotion criteria/Decision:
(reference)			
			<b>Adequate progress:</b> yes/no
Fidelity check completed by:	Review:		<b>Decision:</b> continue; modify; New intervention; refer; end

<b>Intervention # 2</b>	Dates	Progress Monitoring Data	Progress sufficient to meet promotion criteria/Decision:
(reference)			
			<b>Adequate progress:</b> yes/no
Fidelity check completed by:	Review:		<b>Decision:</b> continue; modify; New intervention; refer; end

<b>Intervention # 3</b>	Dates	Progress Monitoring Data	Progress sufficient to meet promotion criteria/Decision:
(reference)			
			<b>Adequate progress:</b> yes/no
Fidelity check completed by:	Review:		<b>Decision:</b> continue; modify; New intervention; refer; end

<b>Intervention # 4</b>	Dates	Progress Monitoring	Progress sufficient to meet promotion criteria/Decision:
(reference)			
			<b>Adequate progress:</b> yes/no
Fidelity check completed by:	Review:		<b>Decision:</b> continue; modify; New intervention; refer; end

## RTI GAP Analysis

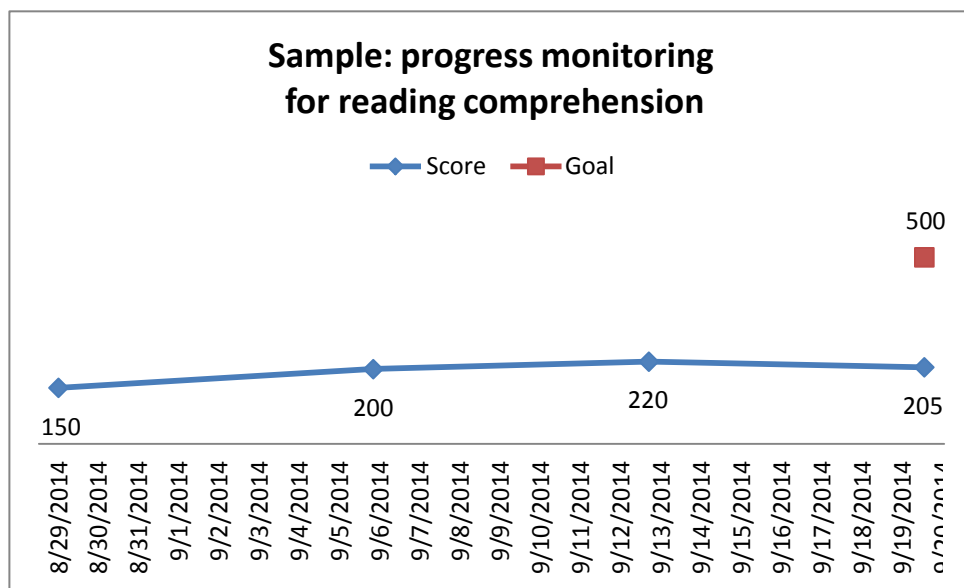
School:      Student:      Teacher:      EIP:      Grade:      Tier:      Area of Concern:      Monitoring Tool:

Date	Score	Goal	Intervention
------	-------	------	--------------

## RTI GAP Analysis SAMPLE

School:	Student:	Teacher:	EIP:	Grade:	Tier:	Area of Concern:	Monitoring Tool:
PCES	Sample	Perfect	Cheal		3	2	SRI
						comprehension	

Date	Score	Goal	Intervention
8/29/2014	150		CARS/STARS
9/6/2014	200		
9/13/2014	220		
9/20/2014	205	500	



Form Last updated July 2014  
 14 15 PCCSS Form 2 GAP Analysis

## Putnam County Schools

## TIER 2 Head Start - Pre-K - K (Children &lt;7 years) Tracking Sheet

Student Name:		AGE:		Sex: M / F		Race: W / B / H / O		Referring Teacher:					
Dates								<b>Intervention:</b> (what are you going to do for this student IN ADDITION to what you are doing for the others?)					
Z													
Y													
X													
W													
V													
U													
T													
S													
R													
Q													
P													
O													
N													
M													
L													
K													
J													
I													
H													
G													
F													
E													
D													
C													
B													
A													

## IDENTIFYING CAPITAL LETTERS

Data Analysis: \_\_\_\_\_

 Evaluation of Intervention (IS IT WORKING?) ☐ yes, continue ☐ yes, modify  
☐ no, discontinue

Peer Comparison: (how are most of the other students doing?) \_\_\_\_\_

Other Teacher Comments: \_\_\_\_\_



## Putnam County Schools

**DOCUMENTATION OF PARENTAL CONTACT****(Recommended form: submit only the # of parent contacts & attempted parent contacts)**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Parent with whom contact was made: \_\_\_\_\_

Contact Information: Phone number(s) \_\_\_\_\_

**[NOTE: also document ATTEMPTED contacts]**Contact #1 ☐ phone ☐ letter ☐ face to face ☐ other \_\_\_\_\_

Contact Date: \_\_\_\_\_

Contact Summary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact #2 ☐ phone ☐ letter ☐ face to face ☐ other \_\_\_\_\_

Contact Date: \_\_\_\_\_

Contact Summary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact #3 ☐ phone ☐ letter ☐ face to face ☐ other \_\_\_\_\_

Contact Date: \_\_\_\_\_

Contact Summary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact #4 ☐ phone ☐ letter ☐ face to face ☐ other \_\_\_\_\_

Contact Date: \_\_\_\_\_

Contact Summary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Administrative Data

For School Year \_\_\_\_\_

Student Legal Name: \_\_\_\_\_

Student called name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Grade Level: \_\_\_\_\_

Primary Home Language: \_\_\_\_\_ Race: \_\_\_\_\_

Gender: \_\_\_\_\_ male \_\_\_\_\_ female

Custodial Parent: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent E-mail: \_\_\_\_\_

Staff Contact: \_\_\_\_\_

Putnam County Schools  
Observation Form

(section 1 may be completed as part of Tier 2 or Tier 3 process; sections 2 & 3 must be completed AFTER parent permission for evaluation)

**Referral for evaluation requires ALL THREE SECTIONS**

Teacher  _____	Grade Level  _____	Date of observation:  _____
Staff completing this form:  _____	Subject being taught:  _____	Time:  _____

### Section 1. Structured Observation of Teacher/Classroom

<b>Classroom Environment</b>	Pleasant	Over stimulating	neutral	dull
	Additional notes regarding environment:			
<b>Materials</b>	available	age appropriate	out of reach	
<b>Student Engagement</b>	high	low	none	
	Additional notes regarding student engagement:			
<b>Numbers</b>	# of adults _____ (Do not include observer) # of students _____			
<b>Rules</b>	Posted	Positively Stated	Short/Clear	Not visible
<b>Adult Interactions</b>	Alpha (positive) i.e. please, thank you, good job, smile		Beta (negative) i.e. no, don't, stop, quit	

### Section 2. Structured Observation of Student

Staff completing this form:  _____	Date of parent permission:  _____	Date of observation:  _____
Subject being taught:  _____	Teacher(s) conducting the class:  _____	Time:  _____

[NOTE: observations MAY NOT be completed by the teacher currently working with the student / for referral purposes observation of the student MUST BE completed AFTER parental consent for evaluation AND in the area of suspected disability]

Placement of the child is conducive to learning (i.e. student can see & hear; can be seen & heard by the teacher)  
Yes \_\_\_\_ No \_\_\_\_

**Peer Interactions:**    ☐ positive    ☐ neutral/withdrawn    ☐ not observed / other notes: \_\_\_\_\_

☐ negative / verbal aggression      ☐ negative/ physical aggression

**Communications:**    ☐ clear      ☐ not clear      ☐ not observed / other notes: \_\_\_\_\_

**Independence:**    ☐ self directed    ☐ required assistance / other notes: \_\_\_\_\_

**Activity Level:**    ☐ within normal limits    ☐ overactive    ☐ under active (lethargic) / other notes: \_\_\_\_\_

**Affect:**    ☐ appears to be a happy child    ☐ sad, withdrawn / other notes: \_\_\_\_\_

[illegible]

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_ DATE of classroom work: \_\_\_\_\_

**(Submit a work sample ONLY for the area of suspected or defined disability; complete a separate form for each subject area to be addressed) (NOTE: progress monitoring (i.e. DIBELS or post tests) are NOT work samples – this should be a sample of daily classroom work)**

Subject area of work sample:

☐ basic reading      ☐ reading comprehension      ☐ reading fluency      ☐ written expression  
☐ basic math      ☐ math reasoning      ☐ oral expression      ☐ listening comprehension

I. Assignment Description: What was the **CONCEPT** being taught or object of the lesson?

\_\_\_\_\_

Time allowed for this assignment: \_\_\_\_\_

Assignment completion by: ☐ small group      ☐ whole group      ☐ homework  
☐ independent      ☐ other: \_\_\_\_\_

Instructions were given: ☐ orally      ☐ modeled (examples)      ☐ written (visual)  
☐ other: \_\_\_\_\_

Assignment was: ☐ grade level      ☐ not grade level (explain) \_\_\_\_\_

\_\_\_\_\_

## II. Assignment Completion:

Modifications (anything different from assistance given to the general class)? ☐ no      ☐ yes,

\_\_\_\_\_

Was behavior an interference factor? ☐ no ☐ yes, if yes, check any that apply:

☐ apathetic, unmotivated      ☐ discouraged      ☐ frustrated      ☐ distracted  
☐ required constant assistance      ☐ out of seat      ☐ off task      ☐ yelling/blurting out  
☐ talking to others      ☐ bothering others  
☐ other issues: \_\_\_\_\_

Other interference factors: skill ☐ yes ☐ no      time ☐ yes ☐ no

## III. Analysis:

Assignment was completed: ☐ yes ☐ no, if not: how much (25%, 50%, etc) Grade rec'd \_\_\_\_\_

Time required for complete: \_\_\_\_\_

Completed as assigned: ☐ yes ☐ no, explain: \_\_\_\_\_

\_\_\_\_\_

Peer Comparison (**VITAL INFORMATION – BE SURE TO COMPLETE THIS SECTION:**

☐ Most other students completed the assignment as directed OR ☐ Other students had difficulty with this assignment  
☐ Peer general average on this assignment \_\_\_\_\_ Additional Comments:

\_\_\_\_\_

## Putnam County Schools Student Support Team Meeting Summary

(may be pasted into SEMS meeting summary page as a template)

Meeting Date: \_\_\_\_\_ Student: \_\_\_\_\_ Grade: \_\_\_\_ School: \_\_\_\_\_

Referring Teacher: \_\_\_\_\_ EIP Teacher: \_\_\_\_\_

Meeting Date:

Meeting Purpose: \_\_\_\_\_ Tier 2 or \_\_\_\_\_ Tier 3 (SST)

Review of previous meeting notes/SST Member assignments:

Areas of Concern/Discussion Points:

Standard assessments:

Teacher input:

Baseline:

Interventions:

Progress Monitoring Data for each intervention:

Recommendations:

Next Meeting Date:

Determination: \_\_\_\_ end interventions \_\_\_\_ modify interventions

\_\_\_\_ decrease interventions \_\_\_\_ increase interventions

Attach signature sheet for all those in attendance

## Meeting Summary

Meeting Coordinator: \_\_\_\_\_

Meeting Date:

Meeting Purpose: \_\_\_\_\_Tier 2 or \_\_\_\_\_Tier 3 (SST)

Student Name: \_\_\_\_\_

Areas of Concern/Discussion Points:

Recommendations:

Next Meeting Date:

Determination: \_\_\_ end interventions \_\_\_ modify interventions

\_\_\_ decrease interventions \_\_\_ increase interventions

Attach signature sheet for all those in attendance

## Private School Referral for Psycho-Educational Evaluation

for the purpose of considering eligibility for special education

### 1. STUDENT INFORMATION

Student's Name:	
School District:	Putnam County
School:	
Grade:	
Primary Language at home:	_____ English _____ Spanish _____ Other
Birth Date:	
Parent Permission to evaluate:	Date:
Extenuating circumstances: _____YES _____NO	

### 2. HISTORY

Reason the child was referred for special education evaluation or re-evaluation (check all that apply):	_____ Academic: __ reading __ math __ language
	_____ Behavior: __ acting out __ withdrawal __ inattentive
	_____ Speech: _____ articulation _____ expressive _____ listening
	_____ Parent request
Has the child attended (or is the child attending) a preschool or Head Start program? _YES _____NO	_____ regular Head Start _____ regular Pre-K
	_____ Community / private day care or pre k program
	_____ Head Start or pre-k inclusion program.
Is this child age appropriate for grade level? _YES _____NO	If no, please check all of the following that apply: Retained: <input type="checkbox"/> (Specify Grade): _____ Started School Late: _____ Held Out of School by Parents: _____
	Is the child's hearing/vision within normal limits (attach documentation)? _YES _____NO
	Attach documentation or explain.



Does the child have significant health concerns, major childhood illness/disease, or a diagnosed syndrome (i.e. ADHD)? _YES ____NO	If yes, please <b>request physician verification (may be documented on PCSS Form 20)</b> :
Does the child take medication on a regular basis? _YES ____NO	If yes, are medications administered: ____at home or ____ by school nurse? Please list medications:
Does the child have motor /coordination/mobility needs? _YES ____NO	If yes, please explain:
Does the child have adaptive or medical needs (e.g., eye glasses, wheelchair, walker, hearing aids, leg braces, feeding tube, etc.)? _YES ____NO	If yes, please explain:
Does the child have other significant issues not covered in the previous questions (attendance or discipline issues)? _YES ____NO	If yes, please explain:  Discipline issues: Attendance issues:
Circumstances require immediate consideration of special education eligibility. _YES ____NO	Please explain:

### 3. RESULTS OF RELEVANT DISTRICT, STATE AND BENCHMARK ASSESSMENTS

Date:	Name of Statewide, Local, or any Benchmark Assessments <b>You may list data here OR ATTACH computer printouts</b>	Results:

**4. Include Proficiency Plan(s) and Progress Monitoring Data and Gap Analysis (PCSS Forms 1 and 2)**

**5. Staff Signatures**

Role	Staff	Date
Staff initiating the referral:		
Academic Coach:		
School Principal:		
Special Education Director:		

**Form: Child History (Parent Report)** Date Completed:

Child's Name:	Child's Date of Birth: Predominant Race:
Language spoken at home:	English Language Proficiency: <input type="checkbox"/> very good <input type="checkbox"/> okay <input type="checkbox"/> poor
Phone where parent/guardian can be reached:	Other emergency contact:
Parent/Guardian name:	Child is Adopted: <input type="checkbox"/> yes: if yes, child's age: ____ <input type="checkbox"/> no
Current Address:	Parent with whom child resides for most of the school year: <input type="checkbox"/> father <input type="checkbox"/> mother <input type="checkbox"/> other How often child sees non-custodial parent: _____
Email:	

Family history of:      learning problems ☐ attention deficit      behavior problem  
☐ psychiatric problems      chronic medical issues      speech problems

If yes to any of the above, describe/explain: \_\_\_\_\_

## Current Family Makeup (persons currently living at home with this child):

Family member:	Relationship to student	Family member:	Relationship to student
1.		4.	
2.		5.	
3.		6.	

Birth History: Complications during pregnancy ☐ yes ☐ no / Full term ☐ yes ☐ no  
 Birth Weight: \_\_\_\_\_ Complications in early infancy ☐ yes ☐ no  
 Developmental milestones on time ☐ yes ☐ no

Has your child had any of the following? <b>CIRCLE ALL that apply:</b> Serious accidents/injuries Head injury with hospitalization Persistent high fevers: Operations/surgeries: Chronic Ear infections: Emotional trauma: Problems with vision/hearing ADHD diagnosis: Bi-Polar diagnosis: Hospitalized in the last 12 months	Psychiatric treatment If yes, where: Psychological _____ evaluations: If yes, date: _____  Pre-K <input type="checkbox"/> yes <input type="checkbox"/> no / Head Start <input type="checkbox"/> yes <input type="checkbox"/> no  Has your child been retained (held back)? <input type="checkbox"/> yes <input type="checkbox"/> no if yes, what grade: ____  List Current Medications: _____ _____ No medications: <input type="checkbox"/>
--	--

**If yes to any of the above**, please give more detail (where, when, etc) \_\_\_\_\_

Community Agencies working with this child: ☐ DJJ ☐ DFACS ☐ Mental Health Agency

Schools my child has attended: \_\_\_\_\_

Strengths -- My child is good at:	Weaknesses -- Things that are difficult for my child:
-----------------------------------	---

Mark any of the following that apply to this child:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> is mostly happy                   | <input type="checkbox"/> has attempted self harm   | <input type="checkbox"/> is hard to control                               |
| <input type="checkbox"/> shows concern for others          | <input type="checkbox"/> poor self control         | <input type="checkbox"/> has a short attention span                       |
| <input type="checkbox"/> bites nails                       | <input type="checkbox"/> is aggressive             | <input type="checkbox"/> is shy/withdrawn                                 |
| <input type="checkbox"/> gets along well with others       | <input type="checkbox"/> is dependent              | <input type="checkbox"/> acts immature                                    |
| <input type="checkbox"/> helps with household chores       | <input type="checkbox"/> shows jealousy            | <input type="checkbox"/> lacks motivation, lazy                           |
| <input type="checkbox"/> is usually pleasant & cooperative | <input type="checkbox"/> sucks thumb               | <input type="checkbox"/> destroys others' things <input type="checkbox"/> |
| <input type="checkbox"/> daydreams often                   | <input type="checkbox"/> wets bed                  | restless  |
| <input type="checkbox"/> does not adjust to change         | <input type="checkbox"/> is uncooperative          | <input type="checkbox"/> is cruel to animals                              |
|  | <input type="checkbox"/> is controlling            | <input type="checkbox"/> is angry   |
| <input type="checkbox"/> is frustrated                     | <input type="checkbox"/> learns slowly             | <input type="checkbox"/> worries a lot                                    |
| <input type="checkbox"/> talks of self harm                | <input type="checkbox"/> is over active            | <input type="checkbox"/> demands attention                                |
| <input type="checkbox"/> hurts others (verbally)           | <input type="checkbox"/> has very few friends      | <input type="checkbox"/> is anxious                                       |
|  | <input type="checkbox"/> lies                      | <input type="checkbox"/> is loud  |
|  | <input type="checkbox"/> is often fearful          | <input type="checkbox"/> cries a lot                                      |
|  | <input type="checkbox"/> hurts others (physically) | <input type="checkbox"/> cannot get along                                 |

<b>Cultural Expectations (list any that apply):</b> i.e. <input type="checkbox"/> children are expected to make eye contact <input type="checkbox"/> children are expected to remain quiet <input type="checkbox"/> children are expected to _____	<b>Child's sleep habits are:</b> <input type="checkbox"/> within normal limits <input type="checkbox"/> has difficulty sleeping <input type="checkbox"/> sleeps too much <input type="checkbox"/> sleeps too little
<b>Study Habits (if applicable), my child:</b> Brings homework/agenda home <input type="checkbox"/> yes <input type="checkbox"/> no Does homework without argument <input type="checkbox"/> yes <input type="checkbox"/> no Organizes work to return to school <input type="checkbox"/> yes <input type="checkbox"/> no	<b>Home Schedule, our family:</b> has meals together <input type="checkbox"/> yes <input type="checkbox"/> no has a regular Bedtime <input type="checkbox"/> yes <input type="checkbox"/> no has regular family fun <input type="checkbox"/> yes <input type="checkbox"/> no
<b>Discipline at home:</b> Home rules are established <input type="checkbox"/> yes <input type="checkbox"/> no // Child generally obeys rules <input type="checkbox"/> yes <input type="checkbox"/> no Who administers discipline? <input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> other _____ Child's response to discipline? _____	

Does your child have any specific limitations or needs that the school should know about at this time? ☐ yes ☐ no if yes, \_\_\_\_\_

(please use the back of this page for adding comments/concerns)

Parent Concerns/Comments/Questions (use reverse side if needed): \_\_\_\_\_

Significant Family Events: (i.e. recent death in the family; mobility; family break up)

Comparison to siblings/close cousins (i.e. child is doing better than/worse than/or about the same as siblings when they were his age): \_\_\_\_\_

Signature of Person Completing this form: \_\_\_\_\_ Date: \_\_\_\_\_

**INITIAL EVALUATION PACKET CHECKLIST (Green Sheet – A Form 13)**  
**HEAD START / PRE-K or K Programs (children under 7 years of age)**

- Directions: 1. Items 1 to 3 must be completed prior to submitting the evaluation request to the Central Office
2. After the testing is completed and the eligibility team/IEP Team has met, the completed checklist should be submitted to the Central Office to document the 60 day timeline allowed under SDE Special Education Program Guideline. Time Line Begins \_\_\_\_\_ Time Line Ends \_\_\_\_\_ (completed by Central Office)

Student Name: \_\_\_\_\_ ☐ Head Start ☐ Pre K ☐ Kindergarten

Staff Submitting Checklist: (**PRINT NAME**) \_\_\_\_\_ arrange needed forms in the order requested

DATE:	Event & Staff Initials:				
_____	1. Referring Teacher Responsibilities:				
_____	_____ obtain parent permission for Vision/Hearing Screen <b>Form 30</b>				
_____	_____ submit V/H form to Ms. Moreland OR request parents bring				
_____	_____ in privately obtained current V/H screening				
_____	_____ <b>Form 4</b> tracking sheets for identified areas of concern				
_____	_____ Meeting summaries with attendance sheets <b>Form 10</b>				
_____	_____ student history ( <b>Form 12</b> )				
_____	_____ with less than adequate progress in 4 to 8 weeks; inform RTI Coordinator (with crisis				
_____	_____ situation <b>or professional judgment related to developmental delay</b> this time line may be reduced)				
_____	_____ provide any available assessment data				
_____	_____ maintain & continue parent communication log <b>Form 5</b>				
_____	_____ obtain adaptive rating scales from School Psychologist (parent & teacher)				
_____	_____ send parent adaptive rating scale; complete teacher adaptive rating scale				
_____	_____ submit all data to School Psychologist for review				
_____	2. School Psychologist:				
_____	_____ review all and add student to <b>SEMS</b>				
_____	_____ print <b>SEMS</b> parent permission to evaluate; return folder to RTI Coordinator				
_____	3. RTI Coordinator obtains:				
_____	_____ parent permission to evaluate				
_____	_____ complete referral for Special Education Testing ( <b>SEMS</b> Eligibility Report Tabs 1-4)				
_____	_____ attendance and discipline records				
_____	_____ relevant medical records (optional <b>Form 20</b> )				
_____	_____ coordinates classroom observation <b>Form 7</b>				
_____	_____ sends completed referral packet to Director of Special Services				
_____	_____ other relevant educational history/information				
_____	4. Director of Special Services				
_____	_____ reviews & forwards the referral to Psychological Services				
_____	5. Data requested by School Psychologist:				
_____	Attention: ECADDES	Adaptive: ABAS II	Behavior: BASC 2	Autism: ASDS / GARS 2	Other: BRIEF
_____	6. _____ Psychological Tests & SEMS Eligibility Student Data Section Completed				
_____	7. _____ Psychological Report/Packet Sent to Due Process Facilitator				
_____	8. _____ Eligibility Meeting				
_____	9. Eligibility Determined <input type="checkbox"/> no <input type="checkbox"/> yes, area _____				
_____	parent attended the meeting: <input type="checkbox"/> yes <input type="checkbox"/> no				
_____	parent name(s): _____				
_____	10. Checklist returned to Central Office				

PCCSS Form 13

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### INITIAL EVALUATION PACKET CHECKLIST (Green Sheet Form 14)

Directions: Items 1 to 5 must be completed prior to submitting the evaluation request to the Central Office; after the testing is completed and the eligibility team/IEP Team has met, **the completed checklist MUST be submitted to the Central Office** to document the 60 day timeline allowed by Program Guidelines. ALL MEETINGS RELATED TO THIS PROCESS WILL BE DOCUMENTED with MEETING SUMMARY AND MEETING ATTENDANCE

Time Line Begins \_\_\_\_\_ Time Line Ends \_\_\_\_\_ (completed by Central Office)

Student Name: \_\_\_\_\_ Grade: \_\_\_\_ Referring Teacher: \_\_\_\_\_

Please arrange needed forms in the order requested

DATE:	Staff :	Event:						
		1. Vision/Hearing Screenings (Form 30)						
		2. RTI Data collection Tier 2 (completed by referring teacher)						
	_____	Form 1            Student Proficiency Plan & Progress Monitoring Review for each area of concern						
	_____	Form 2 or 3    2( <b>academic</b> ), 3 ( <b>behavior</b> )): Gap Analysis						
	_____	Form 5            Parent contacts						
	_____	Form 8            Work Sample with Cover Sheet (for each identified area of concern)						
	_____	Form 12          Student History (parent report)						
	_____	Print out:        Pre/Post Test Data; ALL available standardized test data						
	_____	Attendance and discipline records						
	_____	Attach:          Medical or Previous Psychological records (when applicable) and/or other agency agency reports (may use PCSS Form 20)						
		3. RTI Data Collection Tier 3 (completed by RTI Coordinator)						
	_____	SEMS            Administrative Data Form						
	_____	SEMS            Meeting Summaries and Signature Pages for all related meetings						
	_____	Use FORM 9 as template for SEMS meeting summary						
	_____	Form 1            Student Proficiency Plan & Review (each identified area of concern)						
	_____	Form 33          (optional) REQUEST FOR SLP/O.T./ and/or P.T. SCREEN						
	_____	Form 7            Classroom Observation has been requested						
	_____	SEMS            Eligibility Report tabs 1 & 2						
	_____	Form 21          Communication Form						
		Submit referral packet to School Psychologist						
		4. School Psychologist review all for accuracy/fidelity						
		Print out:        SEMS Permission to evaluate						
		Return to:        RTI Coordinator						
		5. RTI Coordinator						
	_____	Obtain permission to evaluate						
	_____	Insure that classroom observation is completed						
		Submit referral packet to Special Education Director						
		6. Referral Packet sent to Special Education Director						
		7. Packet sent to Psychological Services						
		8. Data requested by School Psychologist:						
		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Attention: ADDES 3</td> <td style="width: 15%;">Adaptive: ABAS II</td> <td style="width: 20%;">Emotional/Behavioral BASC 2</td> <td style="width: 15%;">Autism ASDS or GARS 2</td> <td style="width: 15%;">SLD BRIEF</td> <td style="width: 20%;">Other _____</td> </tr> </table>	Attention: ADDES 3	Adaptive: ABAS II	Emotional/Behavioral BASC 2	Autism ASDS or GARS 2	SLD BRIEF	Other _____
Attention: ADDES 3	Adaptive: ABAS II	Emotional/Behavioral BASC 2	Autism ASDS or GARS 2	SLD BRIEF	Other _____			
		9. Date Psychological Tests Completed & SEMS Eligibility tabs 3, 4, & 5.						
		10. Psychological Report/Packet Sent to Due Process Facilitator						
		11. Eligibility Meeting (completed SEMS Eligibility form)						
		12. Eligibility Determined <input type="checkbox"/> no: date returned to SST _____ with <input type="checkbox"/> Form 21 <input type="checkbox"/> yes, area _____						
		Date services began: _____						
		parent attended the meeting: <input type="checkbox"/> no <input type="checkbox"/> yes: print parent name(s): _____						
		13. Checklist returned to Central Office						

## RE-EVALUATION PACKET CHECKLIST (Orange Sheet)

**ALL School Programs**

Directions: 1. Items 1 to 14 must be completed prior to submitting the re-evaluation request to the Central Office for full evaluation; Items 1 to 4 & 19 thru 21 must be completed if full evaluation is not recommended.

2. After the testing is completed and the eligibility team/IEP Team has met, the completed checklist **MUST** be submitted to the Central Office.

Time Line Ends \_\_\_\_\_ (completed by Central Office) Caseload Teacher: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Homeroom Teacher \_\_\_\_\_

Current Exceptionality: ☐ SLD ☐ SDD ☐ MID ☐ OHI ☐ EBD ☐ S/L ☐ AUT ☐ Other: \_\_\_\_

Current Related Services: ☐ O.T. ☐ P.T. ☐ D/HH

DATE:	Staff initials	Event (include all items in referral packet):					
		1. Vision/Hearing Clearance <b>FORM 30</b>					
		2. Last Psychological (actual date on last Psychological report)					
		3. Previous redetermination/eligibility meeting (NOT the current redetermination date)					
		4. Evaluation Review Meeting to determine re-evaluation needed ( <b>SEMS</b> ) Additional Testing Recommended <input type="checkbox"/> yes <input type="checkbox"/> no (if no, go on to 20/21)					
		5. If yes, Parental Permission to Evaluate <b>SEMS</b> Form					
		6. Referral for Special Education Testing- <b>SEMS ELIGIBILITY</b> Form sections: 1-4 Student / Interventions / Progress / Results					
		7. Social History / Student Background ( <b>FORM 12</b> )					
		8. Parent Contact Information ( <b>SEMS</b> Communication Log or PCSS <b>FORM 5</b> )					
		9. Student Work Samples w/attached checklist ( <b>FORM 8</b> )					
		10. Structured Observation ( <b>FORM 7</b> )					
		11. Medical records (when applicable; may use <b>FORM 20</b> or Other relevant data (related services, inter-agency involvement, etc)					
		12. For the following areas of disability include:					
		For OHI: <input type="checkbox"/> ADDES 3 <b>OR</b> BASC-2 do both teacher & parent forms <input type="checkbox"/> <b>FORM 20</b>	For MID/SDD: <input type="checkbox"/> <b>FORM 17</b> informal adaptive rep <b>AND</b> ABAS II parent & teacher	For EBD: teacher & parent BASC-2	For Aut: ASDS <b>OR</b> GARS <b>AND</b> BASC 2	For SLD: BRIEF (all grade levels): teacher & parent rating	For additional area of suspected disability or change in disability: <input type="checkbox"/> Tier 2 <b>Forms</b> Proficiency Plan & Progress Monitoring
		13. Attach the following: <input type="checkbox"/> <b>SEMS</b> Re-evaluation Determination Conference <input type="checkbox"/> Current IEP <input type="checkbox"/> up to date attendance & discipline records <input type="checkbox"/> PCSS <b>FORM 34</b> (Special Education Data Collection Sheet) data from IEP Goal monitoring <input type="checkbox"/> <b>SEMS</b> Eligibility Report <input type="checkbox"/> most recent grade reports <input type="checkbox"/> most recent post test data					
		14. Packet sent to Central Office					
		15. Referral Packet sent to Psychological Services					
		16. Psychological Testing Completed / <b>SEMS ELIGIBILITY</b> section: Student Data					
		17. Psychological Report/Packet sent to DPF and/or _____					
		18. Eligibility Meeting <b>SEMS ELIGIBILITY</b> Form sections: Factors/Decision Making/Team					
		19. Continued Eligibility Determined: <input type="checkbox"/> no <input type="checkbox"/> yes, area _____ parent attended the meeting: <input type="checkbox"/> yes <input type="checkbox"/> no parent(s): _____ <input type="checkbox"/> <b>SEMS</b> administrative data re-evaluation dates (current & 3-years due) are updated					
		20. <input type="checkbox"/> IF Student no longer qualifies, return the communication FORM 21 to SST					
		21. Checklist returned to Central Office					

Extenuating Circumstances (if passed due date, explain): \_\_\_\_\_

## INITIAL EVALUATION PACKET CHECKLIST (Green Sheet – Private Schools)

1. Items 1 to 10 must be completed prior to submitting the evaluation request to the Central Office.
2. After the testing is completed and the Eligibility/IEP Team has met, **the completed checklist MUST be submitted to the Central Office** to document the 60 day timeline allowed by Special Education Program Guidelines. ALL MEETINGS RELATED TO THIS PROCESS WILL BE DOCUMENTED with MEETING SUMMARY AND MEETING ATTENDANCE

Time Line Begins \_\_\_\_\_ Time Line Ends \_\_\_\_\_ (completed by Central Office)

Student Name: \_\_\_\_\_ Grade: \_\_\_\_ Referring Staff: \_\_\_\_\_

Arrange needed forms in the order requested

DATE:	Staff :	Event:
		1. Vision/Hearing Clearance ( <b>FORM 30 or community based form</b> )
_____	_____	2. Referring Teacher RTI Tier 2 Data collection
_____	_____	<b>FORM 1</b> Student Proficiency Plan & Progress Monitoring
_____	_____	<b>FORM 2 (academic), 3 (behavior), or FORM 4</b> (pre-k-k): Gap Analysis
_____	_____	<b>FORM 5</b> Parent Contact Log
_____	_____	<b>FORM 8</b> Work Samples
_____	_____	<b>FORM 9</b> Meeting Summaries
_____	_____	<b>FORM 12</b> Parent Report (Social History)
_____	_____	Print Out of all available standardized test data & most recent grade reports
_____	_____	3. RTI Coordinator Tier 3 Data Collection
_____	_____	<b>FORM 1</b> Continue Student Proficiency Plan & Progress Monitoring
_____	_____	<b>FORM 2 (academic), 3 (behavior), or FORM 4</b> (pre-k-k): Gap Analysis
_____	_____	<b>FORM 6</b> Administrative Data
_____	_____	<b>FORM 9</b> Meeting Summary & Notes with Meeting Attendance
_____	_____	<b>FORM 11</b> Referral for Psychological Evaluation
_____	_____	<b>FORM 33</b> Optional referral for O.T./P.T./SLP screening or evaluation
_____	_____	Attendance and discipline records
_____	_____	When applicable, medical or previous psychological records and/or other outside agency reports (may use PCSS <b>FORM 20</b> )
		8. Referral Packet sent to School Psychologist for review OR call to meet & review
		9. School Psychologist review, add to <b>SEMS</b> ; print parent permission to evaluate & return to referring staff
		10. RTI Coordinator obtain: Obtain parent permission to evaluate & send referral packet to Special Education Director
		11. RTI Coordinator completes Classroom Observation ( <b>FORM 7</b> ) & forwards to School Psychologist.
		12. Special Education Director sends referral to Psychological Services
		13. Data requested by School Psychologist: ____
		14. Date Psychological Tests & <b>SEMS</b> Eligibility tabs 1-5 Completed
		15. Psychological Report/Packet Sent to Due Process Facilitator
		16. Eligibility Meeting (completed <b>SEMS</b> Eligibility form)
		17. Eligibility Determined <input type="checkbox"/> no <input type="checkbox"/> yes, area ____ Services began: ____ Parent(s) attended the meeting: <input type="checkbox"/> no <input type="checkbox"/> yes: print parent name(s):
		18. Checklist returned to Central Office

Extenuating Circumstances: \_\_\_\_\_

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Putnam County Schools  
Informal Adaptive Behavior Report

Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

Adaptive behavior is a developmentally determined set of coping skills. Deficits in adaptive behavior are defined as **significant** limitations in a student's effectiveness in meeting age and/or culturally appropriate standards of maturation, learning, personal independence, social responsibility, and home, school, or community performance. In each space for each area, circle strength or weakness; if you circle weakness in any area, you must ALWAYS make notes related to the educational impact.

**Independent Function** (feeding, dressing, personal hygiene, grooming, etc)

Circle one:                      Strength                      Weakness

If weakness, describe educational impact: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Physical/Motor Function** (sitting, standing, locomotion, object manipulation, handwriting, etc)

Circle one:                      Strength                      Weakness

If weakness, describe educational impact: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Communication** (receptive or expressive language and overall ability to relate needs, wants, feelings)

Circle One:                      Strength                      Weakness

If weakness, describe educational impact: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Socialization** (interactions with others, reactions to authority, ability to follow rules)

Circle One:                      Strength                      Weakness

If weakness, describe educational impact: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Self Direction/Pre Vocational** (responsibility, personal initiative, coping skills, understanding the use of money/time)

Circle One:                      Strength                      Weakness

If weakness, describe educational impact: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Putnam County Charter School System  
Checklist for Screening Request

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Referring Staff: \_\_\_\_\_ Student's Homeroom Teacher: \_\_\_\_\_

Educational Screenings are for informational purposes only and will not result in eligibility consideration.

Date:	Staff:	Item:
		Form 22 Parent Permission for Screening
		Form 12 Child History/Parent Report
		Educationally relevant medical information (i.e. ADHD diagnosis) Form 20 Medical Verification
		School based standard assessment data (i.e. ITBS; CoGat)
		Send screening referral to PCSS School Psychologist
		Information requested by School Psychologist _____ _____ _____
		Screening Completed
		Screening report returned to referring staff
		Parents contacted with results and consultation

## CHECKLIST for 504 Consideration/Review/Re-evaluation

**ALL School Programs**

Directions: After the process is completed, the completed checklist **MUST** be submitted to the Central Office.

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ 504 Coordinator: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

Check One: Initial request: \_\_\_\_\_ Annual Review: \_\_\_\_\_ Re-evaluation: \_\_\_\_\_

DATE:	Staff initials	Event (include all items in referral packet):
		1. Request/Permission to Evaluate <b>PCCSS Form 22</b> Targeted Screening
		2. Vision/hearing Screening Permission ( <b>PCCSS Form 30</b> ) signed by parent/caregiver _____ V/H signed permission sent to R. Moreland _____ Vision/Hearing Screen completed (**may be from outside source)
		3. 504 Coordinator _____ adds student to <b>SEMS</b> _____ completes <b>SEMS</b> Administrative Data form _____ requests Social History / Student Background ( <b>PCCSS Form 12</b> ) _____ forwards request/permission <b>PCCSS Form 22</b> and Social History ( <b>PCCSS Form 12</b> ) to School Psychologist
		School Psychologist 4. _____ completes targeted screening / attaches report to <b>SEMS</b> _____ report forwarded to 504 Coordinator
		5. 504 Coordinator _____ coordinates meeting with parent/caregiver to review screening results _____ completes <b>SEMS</b> Meeting Summaries & Attendance for all related meetings _____ begins Section 504 Evaluation/Reevaluation Review <b>PCCSS Form 23</b> Sections one through seven insuring the following is collected/completed: _____ <b>SEMS</b> Communication Log; or Parent Contacts <b>PCCSS FORM 5</b> _____ Student Work Samples in identified area of concern ( <b>PCCSS FORM 8</b> ) _____ Medical records <b>PCSS FORM 20</b> (must be current within 1 year (initial referrals) _____ available assessment information
		6. The 504 Coordinator establishes a meeting and insures: _____ parents/caregivers and appropriate staff are notified ( <b>PCCSS Form 24</b> notice of 504 meeting)
		7. parent attended the meeting: _____ yes _____ no      parent(s): _____ Parent rights distributed: _____ yes _____ no
		8. <b>SEMS</b> Meeting Summary & Attendance are completed
		9. 504 Eligibility established: _____ yes _____ no _____ if yes, continue; _____ if no, change SEMS entry for this student to not eligible and go to #13
		10. <b>504 Coordinator</b> _____ completes <b>SEMS</b> Accommodation Plan insuring that parents & appropriate _____ distributes plan to appropriate staff _____ delivers copies to appropriate staff _____ sets date for review meeting
		11. This checklist returned to Central Office: Attention Laura Melton

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**PUTNAM**  
COUNTY CHARTER SCHOOL SYSTEM

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## Medical Evaluation Report

Student: \_\_\_\_\_ DOB: \_\_\_\_\_

**PRINT** Physician/Psychologist: \_\_\_\_\_Date of Medical Evaluation: \_\_\_\_\_ **OR (for ADD/ADHD ONLY)**

Licensed Psychologist (outside the school system): \_\_\_\_\_

1, Diagnosis/prognosis of health impairment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_2. Information regarding the effects of the chronic or acute health problem on strength, vitality, and/or alertness of the student in the educational environment (including a heightened awareness to environmental stimuli that results in limited alertness with respect to the educational environment).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_3. Medication(s) prescribed and dosage(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_4. Information on any special health care procedures required for the student or special diet needs:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_5. Information regarding any medical restrictions or activity which may affect the student's performance in the educational environment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_6. Other relevant information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Signature of Physician / Licensed Psychologist)

Address: \_\_\_\_\_  
\_\_\_\_\_

Date

Phone # \_\_\_\_\_

Fax # \_\_\_\_\_

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**PUTNAM**  
 COUNTY CHARTER SCHOOL SYSTEM

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## PCSS Communication Form

<p><u>For initial referrals:</u> Upon decision to refer a student for evaluation, <b>SST will complete section 1</b> of this form and place it in the referral folder. Upon completion of the Eligibility Meeting, the <b>person coordinating the Eligibility Meeting will complete Section 2</b> and then return this form to the SST Coordinator who will then schedule an SST review.</p>	<p><u>For re-evaluations:</u> Upon completion of the Eligibility Meeting during which the student is found no longer eligible, the <b>person coordinating the Eligibility Meeting will complete Section 2</b> and send this form to the SST Coordinator who then schedules an SST review.</p>
<p><u>For related services:</u> Upon completion of the Eligibility meeting during which a related service observation or evaluation is recommended, the <b>person coordinating the Eligibility Meeting will complete Section 2</b> and deliver a copy of this form to the related service provider (speech, occupational therapy, physical therapy)</p>	<p>For reconsideration of eligibility: The student was evaluated, found not eligible, and was returned for Tier 3 monitoring. Tier 3 monitoring over a period of one full quarter has resulted in additional information. Tier 3 completes Section 3: see page 2</p>

<p style="text-align: center;"><b>SECTION 1</b></p> <p>On this date: _____,</p> <p>the Student Support Team has referred:</p> <p style="text-align: center;">_____ (Student) _____ (grade)</p> <p>for a comprehensive psycho-educational evaluation.</p> <p>This student may require a related service observation or evaluation for:</p> <p><input type="checkbox"/> Speech</p> <p><input type="checkbox"/> Occupational Therapy</p> <p><input type="checkbox"/> Physical Therapy</p> <p><input type="checkbox"/> Behavioral Therapy</p>	<p style="text-align: center;"><b>SECTION 2</b></p> <p>On this date: _____,</p> <p style="text-align: center;">(date of eligibility meeting)</p> <p>the Eligibility Committee has found this student:</p> <p><input type="checkbox"/> Eligible for Specialized Instruction in the area of: _____</p> <p><input type="checkbox"/> Greatest educational impact in what subject(s): _____</p> <p style="text-align: center;">With a recommendation for:</p> <p><input type="checkbox"/> full inclusion <input type="checkbox"/> partial inclusion (# of hours ____)</p> <p><input type="checkbox"/> consultative only <input type="checkbox"/> resource room</p> <p><input type="checkbox"/> separate class <input type="checkbox"/> out of school placement</p> <p><input type="checkbox"/> Not Eligible OR No longer Eligible for Specialized Instruction with a recommendation to:</p> <p><input type="checkbox"/> continue Tier 3 Interventions</p> <p><input type="checkbox"/> continue Tier 2 Interventions</p> <p><input type="checkbox"/> develop a 504 Plan</p> <p><input type="checkbox"/> other: _____</p>
<p style="text-align: center;"><b>SECTION 3</b></p> <p>On this date: _____, the Eligibility Committee has reviewed additional information and made the following determination:</p> <p><input type="checkbox"/> Eligible for Specialized Instruction in the area of: _____</p> <p><input type="checkbox"/> Greatest educational impact in what subject(s): _____</p> <p>With a recommendation for:</p> <p><input type="checkbox"/> full inclusion <input type="checkbox"/> partial inclusion (# of hours ____)</p> <p><input type="checkbox"/> consultative only <input type="checkbox"/> resource room</p> <p><input type="checkbox"/> separate class <input type="checkbox"/> out of school placement</p> <p><input type="checkbox"/> Not Eligible OR No longer Eligible for Specialized Instruction with a recommendation to:</p> <p><input type="checkbox"/> continue Tier 3 Interventions <input type="checkbox"/> continue Tier 2 Interventions</p> <p><input type="checkbox"/> develop a 504 Plan <input type="checkbox"/> other: _____</p>	

For reconsideration of eligibility: The student was evaluated, found not eligible, and was returned for Tier 3 monitoring. Tier 3 monitoring over a period of one full quarter has resulted in additional information. Tier 3 completes Section 3: request for Eligibility Committee review.

To request an Eligibility Committee review, the following information must be submitted:

- ☐ new parent permission to evaluate
- ☐ interventions and progress monitoring data collected since the last eligibility meeting
- ☐ check to insure vision/hearing is current
- ☐ updated work samples/observation
- ☐ any additional medical information
- ☐ most recent CRCT; or other standard test measures

Putnam County Charter School System  
158 Old Glenwood Springs Rd.  
Eatonton, GA 31024

### Parental Consent for Academic and/or Behavioral Screening

**Academic and/or Behavioral Screening is being requested by (check one):**

<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher	<input type="checkbox"/> SST	<input type="checkbox"/> Physician	<input type="checkbox"/> other:
---------------------------------	----------------------------------	------------------------------	------------------------------------	---------------------------------

**School:**

<input type="checkbox"/> Primary	<input type="checkbox"/> Elementary	<input type="checkbox"/> Middle	<input type="checkbox"/> High	<input type="checkbox"/> other:
----------------------------------	-------------------------------------	---------------------------------	-------------------------------	---------------------------------

**Due to concerns regarding (check all that apply):**

<input type="checkbox"/> academic progress for: <input type="checkbox"/> reading <input type="checkbox"/> math <input type="checkbox"/> language <input type="checkbox"/> listening <input type="checkbox"/> oral expression	<input type="checkbox"/> speech <input type="checkbox"/> O.T. <input type="checkbox"/> P. T.	<input type="checkbox"/> Behavior* <input type="checkbox"/> inattention <input type="checkbox"/> impulsivity <input type="checkbox"/> hyperactivity <input type="checkbox"/> aggression	<input type="checkbox"/> other: _____
---	--	---	--

\* if behavior is checked, please request BASC 2 or ADDES 2 from at least 1 teacher/1 parent

Dear Parent or Legal Guardian of \_\_\_\_\_/ DOB \_\_/\_\_\_\_

His/her current homeroom teacher is: \_\_\_\_\_

Your student was referred for individual educational and/or behavioral screening. Screening may include brief classroom observations and/or individual tests that may offer more information about how to better meet your student's educational needs. Screening results will be reviewed with you and, with your further permission, may or may not result in a recommendation for a full evaluation. If you have any questions about the screening process, please call your student's school. Screening results alone cannot be used to make educational decisions or alternative educational placement. If you agree to have this screening done, please sign below.

Thank you for your cooperation.

Sincerely, \_\_\_\_\_

☐ yes, I agree for Putnam County Charter School System to screen my student for academic and/or behavioral concerns.

☐ no, I do not agree for the following reasons:

\_\_\_\_\_

Signature of Parent/Guardian/Surrogate: \_\_\_\_\_ Date: \_\_\_\_\_

Contact info (phone or email): \_\_\_\_\_

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Putnam County Charter School System  
SECTION 504 EVALUATION/REEVALUATION REVIEW MEETING  
and  
504 PLAN ELIGIBILITY DETERMINATION

**SECTION 1: Demographics**

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

History of Retention: \_\_\_\_ never retained \_\_\_\_ retained once \_\_\_\_ multiple retentions

Does language impact academic performance? Yes/No

Language spoken: \_\_\_\_\_ Language at home: \_\_\_\_\_ ESOL services: yes/no

Vision/hearing screening completed & documented? \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 2: Purpose**

Date of 504 Meeting:	Time:
Place: School	Room #:
Parent Concerns:	
Parent Permission to evaluate signed: Yes/No	
Reason for the meeting: ____ Initial 504 Consideration ____ Review ____ Re-evaluation	
Parent response to Meeting Notice: ____ will attend ____ will not attend ____ no response	
Items provided to the parents: ____ notice of the 504 Meeting (PCCSS Form 24) ____ notice of 504 Intent to Evaluate ____ Parent/Guardian Procedural Safeguards	

**SECTION 3: Academic Data Collected & Reviewed (complete sections applicable to this student; delete or cross out others)**

Area measured	Scores/Instrument	percentiles	Age/grade equivalent	Current grades
Basic Reading				
Reading Comprehension				
Basic Math				
Math Reasoning				
Language Arts				
Social Studies				
Science				

Academic Data collected indicates the following

\_\_\_\_ academic improvement is evident      \_\_\_\_ some improvement  
 \_\_\_\_ no improvement      \_\_\_\_ sudden drop in academic performance

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**SECTION 4: Behavioral Data Collected & Reviewed (applicable/not applicable)**

Does this student have behaviors that disrupt or adversely affect the education of the student or others? Yes/No

Describe the specific behaviors:

List disciplinary actions to date:

**SECTION 5: Evidence of physical or mental impairment Yes/No Describe below:****SECTION 6: Are there school attendance issues (truancy; excessive tardiness)? List:****SECTION 7: Other relevant information:**

## SECTION 8: 504 Eligibility and Plan Determination

- A. Based on the above information drawn from multiple sources, the 504 Team answers the following questions:
- Does the student have a physical or mental impairment?
    - If yes, continue
    - If no, the student is not eligible (go to SECTION 9)
  - Does the physical or mental impairment substantially limit a major life activity? Yes/No
    - Considerations:
      - As a result of this impairment, the student cannot perform a particular major life activity in a manner comparable to same age/grade peers
      - Mitigating measures are not considered (decision is made as if the student were NOT using mitigating measures) except eye glasses or contacts
      - A disability that is episodic or currently in remission, does not preclude an eligibility finding if the impairment would substantially limit a major life activity when active
  - Documentation that supports the finding of 'substantial limitation':

**SECTION 9: DETERMINATION OF THE 504 TEAM:** In any event where services are not needed, it is understood that the student is protected by Section 504's anti discrimination provisions. The student cannot be discriminated against the student on the basis of the disability.

- The student is not disabled because there is no physical or mental impairment that substantially limits a major life activity.
- The student is disabled because there is a physical or mental impairment that substantially limits a major life activity and services are needed to insure that the student's educational needs are adequately met. An accommodation plan will be developed.
- The student is disabled because there is a physical or mental impairment that substantially limits a major life activity but services are not needed because the student's educational needs are met as adequately as those of nondisabled peers; no services are needed. For disabilities that are episodic: the student is disabled because there is an episodic physical or mental impairment that, when active, substantially limits a major life activity, and services are needed in order that the student's educational needs are met as adequately as those of disabled peers. A 504 Plan will be developed that will be implemented when the impairment is active. When the impairment is inactive, the 504 Plan will not be implemented.
- For disabilities that are in remission: The student is disabled because there is a physical or mental impairment that is in remission but, when active, substantially limits a major life activity,

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and services are needed in order that the student's educational needs are met as adequately as those of nondisabled peers. The need for a 504 Plan will be addressed if/when the impairment comes out of remission.

**Determination upon re-evaluation:**

Based upon re-evaluation data, the student continues to be disabled under Section 504 because there is a physical or mental impairment that substantially limits a major life activity. The 504 Plan will be reviewed or revised.

Based upon re-evaluation data, the student no longer is disabled under Section 504 because there is not a physical or mental impairment that substantially limits a major life activity. A 504 Plan is no longer needed.

The following 504 Team Members acknowledge by signature that they have participated in this evaluation review meeting and eligibility determination:

Name (PRINT)	Signature	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Original: to 504 Folder  
 Copies: to parent (along with 504 Procedural Safeguards)  
 Attach to SEMS

Putnam County Charter School System  
 Special Programs  
 158 Old Glenwood Springs Road  
 Eatonton, GA 31024  
 Phone: (706) 485-6390  
 Fax: (706) 485-3707

Date: \_\_\_\_\_

Dear Physician:

The Putnam County Charter School System recently completed a psychological and educational evaluation on \_\_\_\_\_ . Results of the evaluation indicate that the student is experiencing difficulty in the following areas:

---

---

---

---

We would like for you to review the enclosed evaluation results in order to determine if there is a medical condition that may be interfering with the student's success in the educational environment. After reviewing the evaluation results, please complete the enclosed medical evaluation report if you feel that there is a chronic or acute health problem that may affect the student's performance in school. The school system will use this information to determine eligibility for individualized program services.

Thank you for your cooperation in providing the school system with the requested information. If you should have any questions, you may contact the Special Programs office at the number listed above to discuss this request.

Sincerely,

Director of Special Programs

Enc.

**Putnam County Board Of Education  
Program for Exceptional Children  
158 Old Glenwood Springs Rd.  
Eatonton, Ga. 31024  
Phone: (706) 485-5381**

**Fax: (706) 485-3707 // Authorization to Release Confidential Information**

**I hereby authorize the Putnam County Charter School System to release the confidential records of my student, \_\_\_\_\_, date of birth \_\_\_\_\_ and request that the records be sent to:**

\_\_\_\_\_

\_\_\_\_\_

The following records are requested:

- ☐ Social History
- ☐ Psychological/Educational Evaluation
- ☐ Individual Education Plan
- ☐ Eligibility Report
- ☐ Summary of Current Services
- ☐ Any/All Pertinent Information

The records requested will be used to determine appropriate educational services and the least restrictive environment in which services can be provided. I understand that the Putnam County Board of Education will not release these records to a third party.

I understand and agree with the above statements.

\_\_\_\_\_  
(Parent/Legal Guardian Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Witness Signature)

\_\_\_\_\_  
Date

\*Authorization to be kept on file.

In compliance with federal law, including provisions of Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990, the Putnam County Charter School System does not discriminate on the basis of race, sex, religion, color, national or ethnic origin, age, or disability in its administration of education policies, programs and activities or in employment.

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**Putnam County Charter School System**  
**158 Old Glenwood Springs Road**  
**Eatonton, GA 31024**  
 Parental Consent for Hearing/Vision Screening

page 1 of 2

Student's Name \_\_\_\_\_ Date \_\_\_\_\_

**Teacher's Name** \_\_\_\_\_ **Grade** \_\_\_\_\_

Dear Parent/Legal Guardian/Surrogate Parent,

We are requesting your permission to conduct a **Hearing and Vision Screening**. We would like to conduct this screening to gather more information about how to better meet your student's needs. The screening will be handled by the school system's Hearing and Vision Coordinator, Mrs. Regenia Moreland. If you have any questions about this screening, please contact your student's school.

Please sign below to let us know whether or not you agree for this screening to take place. Return this letter to \_\_\_\_\_ within five days. If you do not return this form within five days, we will contact you about your decision.

Thank you for your cooperation.

Sincerely,

\_\_\_\_\_ Yes, I agree for the Putnam County Charter School System to conduct a hearing/vision screening for my student.

\_\_\_\_\_ No, I do not agree for the following reasons:

\_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Signature of Parent/Guardian/Surrogate

\_\_\_\_\_  
 Date

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Putnam County Schools  
Vision/Hearing Report

page 2 of 2

Student's Name \_\_\_\_\_ DOB \_\_\_\_\_

Teacher \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Date of Parent Permission \_\_\_\_\_

VISION SCREENING

		Near Point		Far Point	
Examiner	Date	<input type="checkbox"/> passed	<input type="checkbox"/> failed	<input type="checkbox"/> passed	<input type="checkbox"/> failed
Examiner Comments:					
Examiner	Date	<input type="checkbox"/> passed	<input type="checkbox"/> failed	<input type="checkbox"/> passed	<input type="checkbox"/> failed
Examiner Comments:					

HEARING SCREENING

Examiner	Date	<input type="checkbox"/> passed	<input type="checkbox"/> failed
Examiner Comments:			
Examiner	Date	<input type="checkbox"/> passed	<input type="checkbox"/> failed
Examiner Comments:			

**Putnam County Board Of Education  
Program for Exceptional Children  
158 Old Glenwood Springs Rd.  
Eatonton, Ga. 31024  
Phone: (706) 485-6390**

**Fax: (706) 485-3707 // Authorization to Receive Confidential Information**

**I hereby authorize** \_\_\_\_\_

(School/Agency Name)

to release the confidential records of my student, \_\_\_\_\_, DOB \_\_\_\_\_  
(Student's Name)

and request that the records be sent to:

**Putnam County Board of Education**

Program for Exceptional Children  
158 Old Glenwood Springs Rd  
Eatonton, Ga. 31024

The following records are requested:

- \_\_\_\_\_ Social History
- \_\_\_\_\_ Psychological/Educational Evaluation
- \_\_\_\_\_ Individual Education Plan
- \_\_\_\_\_ Eligibility Report
- \_\_\_\_\_ Summary of Current Services
- \_\_\_\_\_ Any/All Pertinent Information/Medical reports
- \_\_\_\_\_ Doctor's Orders for OT/Speech/PT

The records requested will be used to determine appropriate educational services and the least restrictive environment in which services can be provided. I understand that the Putnam County Board of Education will not release these records to a third party.

I understand and agree with the above statements.

\_\_\_\_\_  
(Parent/Legal Guardian Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Witness Signature)

\_\_\_\_\_  
Date

\*Authorization to be kept on file.

In compliance with federal law, including provisions of Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990, the Putnam County Charter School System does not discriminate on the basis of race, sex, religion, color, national or ethnic origin, age, or disability in its administration of education policies, programs and activities or in employment.

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Putnam County Board of Education  
Physical/Occupational Therapy Referral Information Sheet

To be completed by referring teacher.

The student's parents should be consulted by the referring teacher before any referral procedures are initiated. Please complete this form and forward to Laura Melton. When the parental consent for evaluation is returned, you will be contacted regarding an evaluation date.

Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Referring Teacher: \_\_\_\_\_ Special Ed. Program (when applicable): \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent's Address: \_\_\_\_\_

Date Parent Notified: \_\_\_\_\_ Work Phone: \_\_\_\_\_

This referral was initiated primarily due to: Teacher's Concern: \_\_\_\_\_ Parent's Concern: \_\_\_\_\_

What other services does the student receive? \_\_\_\_\_

Are you aware that the student has had or presently has any medical problems? \_\_\_\_\_

If yes, please explain to the best of your knowledge.

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List the educational short-term objective(s) from the student's IEP which you feel cannot be met without the support of a related service. (This information is required if the student is currently receiving special education services.)

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\_\_\_\_\_  
Signature of Referring Teacher      Date

\_\_\_\_\_  
Laura Melton, Director of Special Programs      Date

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Special Education Data Collection and Progress Monitoring Form **(IF computer program printouts with the same data are not available)**

Area of difficulty: \_\_\_\_\_ Grading Period: \_\_\_\_\_ 9 weeks

IEP Objective: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Criteria: \_\_\_\_\_

**EACH IEP Goal must have** a minimum of monthly data collection points from the inception of the current IEP:

Date:	Score/Grade:	General Class average	Progress toward promotion criteria: Yes/no

Teacher comments (optional: may include the back side of this page): \_\_\_\_\_

## FUNCTIONAL BEHAVIORAL ASSESSMENT

Initial Plan: / Revision:

Student Name:		Grade:
DOB:		Teacher:
School: PPS /PES /PMS /PHS Other:	Gender: male / female	Primary Language:
Behavior(s) of Concern: (must be stated in 1. MEASURABLE terms 2. OBSERVABLE terms		1. 2.

Previous Interventions: (check all that apply)	<input type="checkbox"/> Removal from situation <input type="checkbox"/> Seating change <input type="checkbox"/> Parent conference <input type="checkbox"/> Detention <input type="checkbox"/> Mentoring/tutoring <input type="checkbox"/> Administrative action <input type="checkbox"/> Point sheets/strike sheets <input type="checkbox"/> Modified work <input type="checkbox"/> Extra assistance	<input type="checkbox"/> Behavioral contract <input type="checkbox"/> Added to IEP goals <input type="checkbox"/> Counseling with school counselor <input type="checkbox"/> Counseling with community counselor <input type="checkbox"/> Referral to SST <input type="checkbox"/> Individual incentives <input type="checkbox"/> Other: list
Previous history relevant to current behaviors:		
Data Collection Methods:	<input type="checkbox"/> Review of school records <input type="checkbox"/> Review of medical records <input type="checkbox"/> Informal assessments (subjective reports) <input type="checkbox"/> Formal/standardized assessments	<input type="checkbox"/> Review of office referrals <input type="checkbox"/> Screenings <input type="checkbox"/> Interviews <input type="checkbox"/> Classroom observations <input type="checkbox"/> Review of point and or strike sheets <input type="checkbox"/> Other:
Signature of Staff Involved in FBA: 1. 2. 3.		

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<b>Data for identified behavior:</b> Intensity: Frequency: Duration: Other relevant information:	<b>Data for identified behavior:</b> Intensity: Frequency: Duration: Other relevant information:
<b>Triggers</b> (what happens to set off the behavior): <input type="checkbox"/> Teacher reprimand <input type="checkbox"/> Negative attention <input type="checkbox"/> Teasing by peers <input type="checkbox"/> Transition time <input type="checkbox"/> Possible Sensory overload	<b>Contributing Factors</b> (anything that might be impacting the behavior): <input type="checkbox"/> Change in routine <input type="checkbox"/> Environmental stimuli <input type="checkbox"/> Home problems <input type="checkbox"/> Peer interactions <input type="checkbox"/> Other
<b>Response to Behavior</b> (what happens directly after the behavior occurs?) <input type="checkbox"/> Move closer to teacher <input type="checkbox"/> Increased adult supervision <input type="checkbox"/> Student interview <input type="checkbox"/> Supplemental service (call in counselor/administration) <input type="checkbox"/> Removal from setting <input type="checkbox"/> Other:	<b>Function of the Behavior</b> (what does the student gain or get out of the behavior?) <input type="checkbox"/> Attention <input type="checkbox"/> Control <input type="checkbox"/> Object and/or activity <input type="checkbox"/> Attempt to communicate needs <input type="checkbox"/> Sensory stimulation <input type="checkbox"/> Other:
<b>Possible Reinforcers (student may respond to ??)</b> <input type="checkbox"/> Tangible items (stickers, smiley faces, etc) <input type="checkbox"/> Edible (ice cream, snack time) <input type="checkbox"/> Peer association (time with ---) <input type="checkbox"/> Adult association (time with ---) <input type="checkbox"/> Special activity <input type="checkbox"/> Good note home <input type="checkbox"/> Phone call home <input type="checkbox"/> Item from school store <input type="checkbox"/> Homework pass <input type="checkbox"/> Lunch with ---- <input type="checkbox"/> Teacher helper; class leader <input type="checkbox"/> Free time for ---- <input type="checkbox"/> Other:	<b>Strengths/Interests of this student:</b> 1. 2. 3. 4. 5.  Student's best school subject(s): _____  Student's most difficulty subject(s): _____

## APPENDIX B

### Web Resources

Readworks.org

Discipline Help: You Can Handle Them All: <http://www.disciplinehelp.com/>

Do What's Right: <http://dww.ed.gov>

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

Florida Center for Reading Research: [www.fcrr.org](http://www.fcrr.org)

Oregon Reading First: <http://oregonreadingfirst.uoregon.edu/>

Pikes Peak Literacy Strategies Project: [www.pplsp.org](http://www.pplsp.org)

What Works Clearinghouse website: [www.w-w-c.org](http://www.w-w-c.org)

Recognition and Response: <http://www.recognitionandresponse.org/>

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

The Center for Data Driven Reform in Education <http://www.cddre.org/>

National Center for Student Progress Monitoring <http://www.studentprogress.org/default.asp>

Office of Special Education Programs (OSEP) - Responsiveness to Intervention in the SLD Determination Model:  
[http://www.osepideasthatwork.org/toolkit/ta\\_responsiveness\\_intervention.asp](http://www.osepideasthatwork.org/toolkit/ta_responsiveness_intervention.asp)

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

Advances in Progress Monitoring – University of Minnesota  
<http://cehd.umn.edu/EdPsych/SpecialEd/CBMConference/handouts.html>

Response to Intervention and Positive Behavior Supports - OSEP  
<http://www.pbis.org/>

whatworksclearinghouse.com

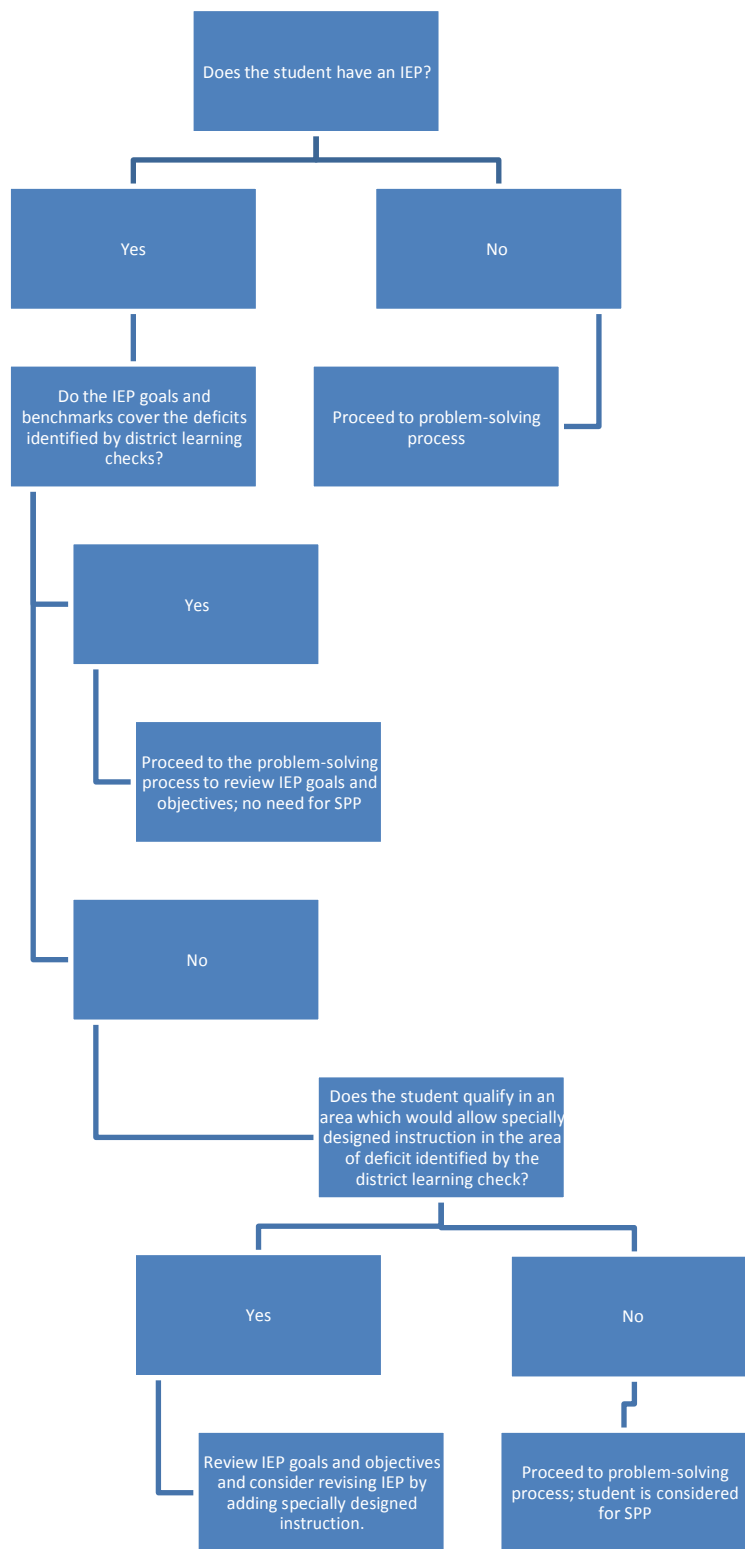
## APPENDIX C

### RTI In Action

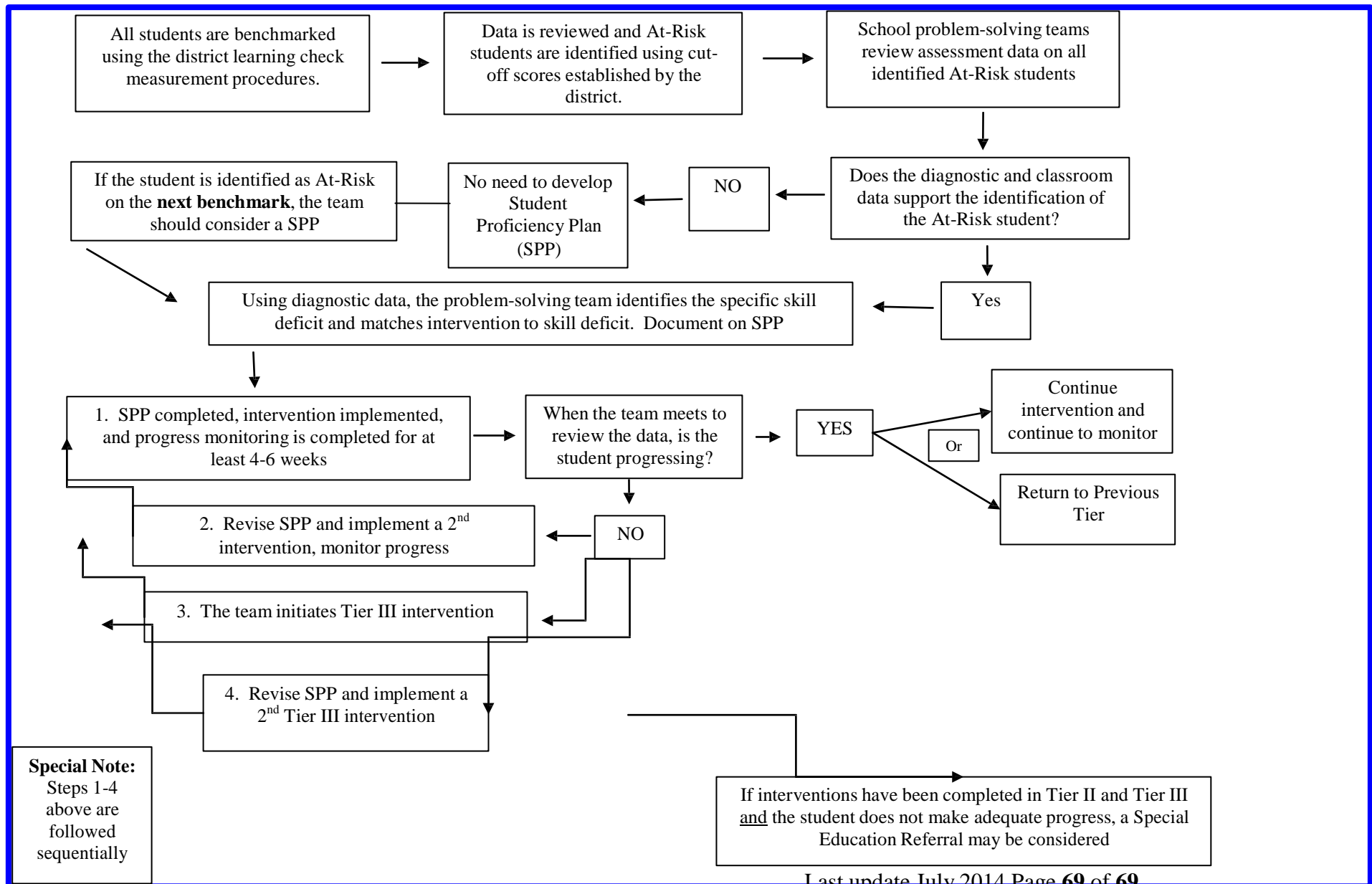
Source: RTI Guide for Parents at [www.ncld.org](http://www.ncld.org)

- ▶ Paul is a first grade student. At the beginning of the school year, Paul's score on the universal screening fell below the school's cut-point to identify students at-risk for reading failure. At the end of 5 weeks, Paul's scores on the curriculum based word identification fluency measurement fell below the performance needed to indicate a positive response. So, Paul was considered unresponsive to Tier 1 general education [the core] and in need of additional support.
- ▶ The school met with Paul's parents. During the meeting, they explained Paul's scores and their concern. Paul entered preventative tutoring - - Tier 2 of the school's RTI program. Paul's parents received a detailed written intervention plan. [BCPS: Student Proficiency Plan (Form 1)]
- ▶ Paul received preventative tutoring four times a week for 45 minutes per session, in a small group with two other students. Weekly monitoring (Form 2) was shared with Paul's parents. They were also advised that they could request a formal evaluation under the IDEA if they suspected that Paul might have a disability. *[Reminder at this point: Even though a parent has the right at any time to request an evaluation, research states that RTI interventions be administered with fidelity. If an intervention that is being attempted is unsuccessful, the school should quickly move to another intervention. RTI is NOT the road to special education. RTI looks at the core instructional program and appropriate movement throughout the Tier levels.]*
- ▶ After 8 weeks under Tier 2, Paul showed progress exceeding the school's expectations. He returned to Tier 1 general [core] instruction, with the hope that he would now progress adequately. The school continues to monitor his progress weekly. *[Also, if an intervention is working, continue with it.]*

## Planning Process Flow Chart



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