COLLABORATIVE PROBLEM SOLVING AND RESPONSE TO INTERVENTION (CPS/RtI)

A Multi-Tiered System of Supports

Psychological Services
Exceptional Student Education & Support Services

SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

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Overview of Collaborative Problem Solving (CPS)

Problem solving is a method of determining a solution for an agreed-upon problem that includes a variety of stakeholders with multiple perspectives. An array of data are used in this process, ensuring that a “complete picture” of the issue or problem is obtained, and that solutions are arrived at after careful consideration of all suggestions and ideas.

The problem solving method has often been described as including four stages. They are as follows:

- **Identify the problem** (i.e., pinpoint the problem in measurable terms)
  
  **NOT** the student is lazy;
  
  **BUT RATHER**, the student’s rate of work completion is 40%, while the expectation is 100%.

- **Analyze the problem** (i.e., consider student/instructional environment “fit” to generate hypotheses about causes)
  
  **NOT** the student must have a disability and needs to be “tested” because his/her rate of work completion is so low;
  
  **BUT RATHER**, the student has not mastered key skills; the work assigned is above his/her instructional level.

- **Select and implement an intervention** (i.e., use evidence-based interventions to address the identified problem)
  
  **NOT** I’ll provide preferential seating for the student near my desk;
  
  **BUT RATHER**, I’ll use targeted curricular materials to supplement core instruction in the area of difficulty.

- **Progress monitor and evaluate effectiveness** (i.e., use data-based graphing to monitor intervention outcomes)
  
  **NOT** anecdotal or intuitive tracking of intervention outcomes;
  
  **BUT RATHER**, graphing of percent of work completed on a weekly basis during the intervention period, compared to the 40% rate obtained at baseline, to determine if the intervention is effective

Note that problem solving is also a self-correcting process. That is, when an intervention is not successful, it is recycled back to a problem solving team for considerations about what should be tried next. The graphic below illustrates the fluid and self-correcting nature of the problem solving process.
This method is believed to be the best approach to managing student problems in the classroom, be they academic or behavioral. That is, problem solving provides the essential infrastructure for RtI (i.e., thinking about, planning for, implementing, and evaluating interventions tried in the classroom).

In the Broward Schools, problem solving for general education students is conducted under the auspices of the Collaborative Problem Solving (CPS) team. The Superintendent has mandated that each school in Broward have a duly constituted and fully functioning CPS team to address academic and/or behavioral problems of students in the general education classroom. In years past, such teams were referred to by a variety of names including: Child Study, Intervention Assistance, Instructional Support, etc. Because of the national and state emphasis on problem solving in a team context, the district eventually settled on the designation Collaborative Problem Solving (CPS) teams. The CPS team is the central repository for academic and/or behavioral concerns about general education students and it is the primary vehicle by which interventions are planned, implemented, progress monitored, and evaluated—that is, the CPS team is the School-Based Leadership Team mentioned in all FLDOE MTSS/RtI documents and the means by which RtI is carried out in the Broward Schools.

**Essential Elements of Collaborative Problem Solving (CPS)**

The existing literature on effective problem solving teams has consistently identified a core set of elements that must be in place for such teams to fulfill their intended purpose. These elements are:

1. **Regular Education Support**

A CPS team is intended to support teachers in assisting hard-to-teach students make more progress within the general education classroom. It is important that all parties involved understand that the goal of the process is to have the student make progress in response to well-designed interventions and that an intervention is an action initiated by an adult to increase or decrease a targeted student behavior. Referrals, evaluations, persons, or places are not interventions. When CPS teams are seen as performing exclusively pre-referral activities for students who are to be evaluated for possible special education classification, they fail to achieve their intended purpose and staff members may experience frustration rather than support.

2. **Teacher Involvement**

Teacher involvement begins when all teachers are provided with a clear understanding of the purpose of the team support process. The teacher who requests assistance must be an active participant in all of the problem-solving steps. Without this level of involvement, it is unlikely that interventions, regardless of quality, will be implemented.
3. Administrator Leadership/Participation

Having an administrator take a leadership role and be seen as an active participant in team activities indicates that a school has made a priority commitment to making this type of support a reality. Since many schools are more accustomed to a “Child Study Team” model, one cannot assume that a CPS team will evolve without strong and visible administrative support.

4. Consistent Team Membership and a Regular Meeting Schedule

Effective CPS teams are not ad hoc groups. All staff know who their team members are and what they are expected to do in each of the steps of the problem solving process. If a school aspires to use the power of teaming to support its teachers, the team must meet regularly. Teams that meet on an irregular basis (e.g., less than twice per month) are not seen as vehicles for significant support in their schools. Regular meetings promote an increased sense of accountability for team members who know when and how they will be expected to report on cases for which they have an assigned responsibility.

5. Parent and Student Participation

Active parent participation is an integral part of the problem solving process. Parents are important sources of historical and environmental information about students. They should be invited to participate and be informed at all decision-making points. Parent participation is documented. Students, being served through interventions, should have a clear understanding of what is expected of them and, whenever possible, they should play an active role in self-monitoring their behavior.

6. Efficient Time and Resources Management

While teaming can be a powerful way to produce quality problem solving outcomes, it is important to allocate only the amount of staff time that a particular task requires. For example, one team member, rather than the full team of six or seven, can confer with a teacher to develop a clear definition of a student’s problem. A tiered model allocates additional resources to problem solving efforts when the progress monitoring data support that need. Also, a team using a structured meeting format (e.g. setting time limits to accomplish specific tasks) is far more likely to produce a meaningful product, and in a shorter amount of time. Efficient meetings also require that team members perform key roles such as meeting leader, recorder, and timekeeper.

7. Team Development Commitment

As cited in Element 3, many of our schools are more accustomed to the “Child Study” model. Therefore, it requires a commitment of a significant amount of time for staff members to learn and practice the new activities required to implement a genuine CPS model. In addition to scheduling training experiences on requisite skills, teams benefit from devoting a portion of their regular meeting times to self-assessment of their process and to expanding their collective repertoire of interventions.
8. **Problem Behavior Identification**

Whether the teacher’s concern about a student is related to academics or behavior, the initial description of the problem is often a general one, including labels rather than behaviors (e.g., “lazy”, “unmotivated”, “slow learner”, “poor reader”). Effective problem solving requires the definition of the problem in terms of what the student is doing/not doing or what one could observe/measure that represents the teacher’s expressed concern. If multiple problems are identified, they are prioritized and targeted one at a time for intervention.

9. **Data Collection and Analysis**

An understanding of the types of data required for decision-making about interventions and how to collect/document them is essential for team members to be able to communicate with one another. The types of data needed are different from those that traditionally have been used in diagnosing student problems (e.g., information about the antecedents of a problem behavior and its consequences). Effective teams make use of their support staff with particular areas of expertise (e.g., reading or behavior) in determining how to collect data that are needed and how to interpret the data once collected. Interpretation of data leads to generation of hypotheses about the causes of problems and to identification of desired replacement behaviors.

10. **Pre-Intervention Problem Measurement (Baseline)**

The development of a baseline for the target problem in quantitative terms determines whether the teacher or other team members can make any subsequent judgments about whether the student is responding to interventions that are implemented. Failure to collect a pre-intervention baseline can be detrimental to the student in that progress may go unrecognized and result in incorrect inferences about the severity of the problem.

11. **Evidence-Based Intervention Availability and Usage**

Schools wishing to offer an efficient intervention support system must have “off-the-shelf” intervention resources available for use by teachers. The interventions selected for use must be matched to the targeted problem and should be based upon evidence supporting their effectiveness in addressing the type of problem presented. An increasing number of resources are becoming available for use by teams in identifying these interventions. Examples include the *Struggling Reader Chart*, the *Struggling Math Chart*, and for behavioral problems, resources such as the CD collection of tactics called *Responding to Individual Differences in Education (R.I.D.E.)*.

12. **Follow-Up for Intervention Implementation Fidelity and Fair Evaluation of Outcomes**

All of the effort that goes into clearly defining a student’s problem, and developing an intervention plan to address it, is sometimes ineffective because the intervention is not implemented as intended. The team’s involvement with intervention
support must extend beyond the point of identifying the interventions and into assisting the teacher with setting them up, keeping them going, and evaluating student progress. Teachers and other team members can only make judgments about student response to interventions if the interventions identified are implemented in a manner consistent with the method used in researching their effectiveness and if the interventions are tried for a reasonable time period before student response is measured. Premature conclusions on the effectiveness of an intervention may stop an effort that might produce positive results if given a proper chance to succeed.

13. **Post-Intervention Problem Measurement and Evaluation**

The degree to which the CPS team’s process is successful is evident in the progress that students make in response to interventions applied. Successful outcomes reinforce student and teacher efforts. Teachers may be more willing to continue working with hard-to-teach students when they can see progress. Also, when interventions produce positive results, teachers may use them with other students who have similar difficulties. Outcome evaluation data also may serve to identify areas in which teams may require in-service training experiences.

At times, CPS teams may wish to obtain a self-assessment of their progress and needs with regard to the essential elements listed above. To that end, a *Benchmark Checklist* has been developed that assists teams with the vital process of understanding where their current strengths and needs for development lie. To obtain a copy of the *Benchmark Checklist* see Appendix A or use the link provided in Appendix D.

*R.I.D.E. is a computerized collection of evidence-based, behavior interventions produced by Sopris West.*

**Overview of Response to Intervention (RtI)**

Response to Intervention (RtI) is defined as “the change in behavior or performance as a function of an intervention (Gresham, 1991). RtI is implemented as a leveled or tiered approach to instructional delivery that includes interventions of increasingly higher intensity, based on a student’s need; that is, a multi-tiered system of supports (MTSS). Assessment data provide the evidence of student learning, and based on this information, decisions are made about the most appropriate instruction, including interventions, that will help a student learn. Likewise, behavior management is addressed in a leveled or tiered approach, and decisions are made about the best behavioral interventions to employ based on assessment and data. A problem-solving method of decision-making is employed and results of efforts are documented. The process is intended to result in better learning opportunities (academic and behavioral) and higher achievement for all students.

The delivery model is one of tiered interventions for both academic and behavior problems. Academically, the vast majority of students (75-80%) is served in Tier 1 with the district’s core curriculum. A small percentage (10-15%) is served in Tier 2 with strategic interventions and a very small percentage (5%) is served in Tier 3 with comprehensive and intensive small group or
individualized interventions. Behaviorally, the vast majority of students (75-80%) is served with Tier 1 universal strategies; a small percentage (10-15%) receive Tier 2 interventions which are targeted, and a very small percentage (5%) receive Tier 3 interventions which are intensive and individualized. A visual depiction of the MTSS model with the three tiers delineated is provided in Appendix B.

**What Does RtI Add to CPS?**

While CPS provides the basic infrastructure for intervention planning and implementation, RtI adds three essential components. These components are: (1) a tiered system of intervention delivery (MTSS) that becomes progressively more intensive in relation to the student’s identified problem(s); (2) use of evidence-based interventions that are research based and supported by a proven “track record” of effectiveness with the student’s identified problem(s); and (3) systematic progress monitoring of interventions to evaluate their effectiveness.

**1. A Tiered System of Intervention Delivery**

RtI is constructed around a 3-tiered model of intervention delivery (MTSS). Tier 1 is called “universal” because the methods used at this level are what all students receive. On the academic side, Tier 1 is the core curriculum, in each subject area, that all students receive in each classroom, at each grade level. On the behavioral side, Tier 1 is the school-wide/class-wide approach to behavior management used for all students (e.g., CHAMPs). Tier 2 is called “strategic” or “targeted” because these are interventions targeted to specific student problems. Tier 2 consists of strategies that are supplemental—that is, provided in addition to, not in place of, the core curriculum or behavior management approach. Tier 2 interventions are generally targeted to at-risk students and they are usually delivered in a small group format (e.g., a group of 5 struggling readers in a classroom is provided with supplemental reading instruction, from a reading coach, 30 minutes per day, 5 days per week, in addition to receiving all core instruction in reading from the classroom teacher). Tier 3 is called “intensive” because at this level the student needs interventions that are specifically tailored to his/her needs and intensively focused. As at Tier 2, these interventions are supplemental—that is, provided in addition to all core instruction in the student’s area of difficulty.

**Tier 1: Universal.** “If the water in the aquarium is dirty, it makes little sense to single out struggling fish for corrective treatment. The first corrective treatment that should be applied is: clean the water in the aquarium; all the fish will likely benefit from this action (Source: Amelia Van Name Larsen, Pasco County Schools).” This metaphor highlights the essential philosophy, and the associated problem-solving tasks, of Tier 1. Recall that Tier 1 represents the core curriculum for academics, and the school-wide approach to classroom management of behavior. The established “rule of thumb” for effectiveness of Tier 1 strategies is that approximately 75-80% of students should be demonstrating success in the classroom with the approaches being used. Using reading as an example, a simple way to assess whether Tier 1 strategies are effective is to calculate the percent of students achieving FCAT level 3 or higher in reading. This analysis should be completed for the total student population, and for all AYP subgroups as well. If 75-80% of all students, and students in all subgroups, are achieving at or above this criterion, it would suggest that the core curriculum (Tier 1 strategies) in reading is indeed effective.
On the other hand, if only 50% of students are achieving at FCAT level 3 or higher (or 50% of students in several subgroups), this would suggest problems with the core curriculum in reading. The methods being used are not serving the majority of students as effectively as they should. At this point, it would make little sense to keep singling out individual students for extra assistance with reading, until the problems with the core curriculum are addressed. All students are likely to benefit from improved Tier 1 strategies, even those who are already relatively proficient in reading. Additionally, if the new Tier 1 strategies prove effective, far fewer students will need the supplemental interventions required at Tier 2. When Tier 1 methods are shown by data (e.g., FCAT results) to be ineffective, exactly which new core curricular strategies should be tried is a matter of deliberation for the problem solving team. Using the resources available at the school and at the District level, decisions should be made about what changes need to be implemented at Tier 1 to attain the desired target of 75-80% of students achieving at expected levels or above. Once the changes have been implemented, the next iteration of data (e.g., results of benchmark testing and the following year’s FCAT results) will allow for assessment of the effectiveness of the new Tier 1 strategies.

On the behavioral side, a means of obtaining a quick and useful “snapshot” of the effectiveness of Tier 1 strategies would be to examine percentages of students with office discipline referrals, suspensions/expulsions, and perhaps, student attendance rates. If the percentages of students receiving discipline referrals, suspensions/expulsions, and evidencing poor attendance rates are less than 20-25%, this would suggest that 75-80% of students are not experiencing significant behavioral problems at school, and Tier 1 strategies for behavior are effective. As noted above, this analysis should be carried out for both the total student population and all AYP subgroups as well.

**Tier 2: Strategic/Targeted.** At Tier 2, at-risk students who are struggling with either academics and/or behavior are identified and provided with interventions targeted to their specific needs. As noted above, these interventions are supplemental to Tier 1 strategies and are generally delivered in a small group format. How are such students identified? A combination of existing methods may be used to accomplish this task. For academic subject areas, screening strategies such as benchmark testing, use of the FAIR, DAR results, DIBELS results, etc. should be routinely used to identify students who are struggling with academic content. When the record of screenings demonstrates a consistent pattern of performance that is below age or grade-level expectations, consideration should be given to whether or not the student would benefit from Tier 2 interventions. Decisions about whether to try Tier 2 interventions, and what strategies should be used, are made by the CPS team at the school. For behavior problems, a combination of office discipline data, suspension/expulsion records, and teacher reports of students displaying problem behaviors in the classroom will help establish which students may need assistance from the CPS team with regard to Tier 2 interventions for behavior.

**Tier 3: Intensive.** Students who continue to make insufficient progress toward age or grade-level standards with Tier 2 interventions are identified and selected for Tier 3 interventions. The progress monitoring data from Tier 2 interventions allow the CPS team to make this determination. If progress monitoring indicates that the student is not closing the “performance gap” (e.g., is not making sufficient progress toward the pre-defined goal or standard) with Tier 2 methods, then Tier 3 strategies should be tried. The essential change from Tier 2 to Tier 3 is one of “intensity”—that is, a change in frequency of intervention (e.g., from 3 days/week to 5 days/week), duration of intervention (from 30 minutes/session to 45 minutes/session), method of
intervention (e.g., from group counseling for problems with anger management to a PBIP along with individual counseling), or a combination of some or all of these increases in intensity of intervention delivery.

2. Evidence-Based Interventions

RtI makes use of evidence-based interventions to improve student performance. By definition, these are research-based methods with a proven "track record" of effectiveness with the student’s particular area of difficulty. In some areas, most notably reading, the approved evidence-based methods for the Broward Schools are clearly delineated in the District’s Core Curriculum and Struggling Reader Charts (Elementary and Secondary). For reading, those methods/interventions listed in the Core Curriculum and Struggling Reader Charts should first be used, prior to trying other methods. For math, CPS teams may access the Struggling Math Charts as one source for interventions. In other academic areas, and for behavioral problems, a wide array of evidence-based interventions may be found on numerous web sites, or in purchased programs from vendors (e.g., the R.I.D.E. program from Sopris West). Links to these sites are provided in the chart in Appendix D (see point #3, evidence-based interventions).

3. Progress Monitoring

Progress monitoring of interventions is the “heart and soul” of RtI. It is the means by which student progress in response to interventions is documented, and it is the mechanism that creates the data for data-based decision making. Without effective progress monitoring, RtI fails to achieve its intended purpose of assisting students make gains in acquisition of needed academic and/or behavioral skills and competencies. Progress monitoring always requires graphing. The student’s performance in an identified area (e.g. reading fluency, as measured by words read correct per minute) is plotted on a line graph throughout the entire course of intervention. It is then compared to several important reference points: (1) his/her performance prior to the start of intervention (baseline), (2) expectation (a benchmark or grade-level standard), and (3) performance of the peer group on the same skill. In this way, vital information about the student’s rate of progress is documented and the CPS team can make effective decisions about the interventions being implemented. The following section provides additional information about progress monitoring with graphic examples to illustrate essential points.

Understanding Data-driven Decision Making with RtI

In the RtI approach, the first decision that needs to be made concerns the three Tiers of intervention. That is, do data indicate the problem requires Tier 1 strategies to be modified for all students; or is the problem such that Tier 2 or 3 strategies are needed to assist an individual student? The graphics below provide examples of such data, with conclusions drawn about what needs to be done in each case.
Compliance with Teacher Requests (Example #1)

In these examples, effectiveness of classroom management is being addressed by examining the percent of compliance students demonstrate when given teacher directions and requests. When assessing what Tier of intervention is appropriate for a particular problem, three pieces of information are needed: (1) an expectation of performance, (2) the target student’s level of performance, and (3) the peer group’s level of performance. In the graphic above, the teacher’s expectation is that students will be compliant with her requests about 80% of the time. Most students in the class (the peer group) meet or exceed this expectation, while the target student’s level of compliance is only 20%; significantly below both expectation and the peer group’s actual performance. The appropriate conclusion drawn from these data is that this represents an individual student problem. The classroom management strategies used by the teacher are effective for the vast majority of students in the class;
hence, this is not a Tier 1 problem. A CPS team should recognize from these data that their first approach to the problem should be assisting the teacher with a Tier 2 intervention with the target student to increase compliance.

Compliance with Teacher Requests (Example #2)

In this second example, it should be apparent that both the target student and the peer group are performing well below the teacher’s expectation for compliance. Even though the teacher has singled out the target student as in need of particular assistance with compliance, data do not support this conclusion. Rather, the data suggest a Tier 1 problem; the classroom management strategies being used by the teacher are ineffective, and they are ineffective for the vast majority of students in the class. At this point, it would make little sense to single out the target student for Tier 2 interventions; instead, new (or better
implementation of) class-wide behavior management strategies (Tier 1) are needed to improve all students’ levels of compliance.

Compliance with Teacher Requests (Example #3)

In this third example, both problems exist. The peer group’s performance is significantly below the teacher’s expectation for compliance, and the target student’s performance is substantially lower than peers. The remedy in this case would be a combination of the previous two approaches. Tier 1 strategies need to be changed to improve levels of compliance for all students in the class; simultaneously, a Tier 2 intervention for the target student should be considered by the CPS team to supplement the new Tier 1 strategies being employed for the entire class.
Once it is established that a situation represents an individual student problem (not a Tier 1 problem), the CPS team must next consider what Tier 2 or 3 interventions are needed to support the student’s needs in the classroom, and they must devise a data-based method for progress monitoring. The graphic below illustrates several key elements required for effective progress monitoring.
First, the benchmark level of performance (the goal or standard) should be apparent for the skill being measured (as seen in the red dashed line at the top of the graph). It should also be apparent that the peer group in this class is on a trajectory to attain the benchmark (as seen on the blue aim line). At baseline (when the student is being exposed to only Tier 1 strategies in the core curriculum), his performance is significantly below the peer group, and the trajectory of performance is “flat;” that is, no progress is being made toward closing the performance gap between either the peer group or the benchmark standard. This can be seen by simple inspection of the data points, or if preferred, a “line of best fit” (trend line) to the data points can be drawn for ease of visual comparison with the aim line. The trend line is determined by minimizing the distance between all available data points with the line that is drawn. In the graph above, a trend line of the data points at baseline would look as follows; hence, the conclusion that the trajectory of performance is “flat” (i.e., no progress is being made).

During Intervention #1 (Tier 2), it can be seen that the student is making some improvement with acquisition of the skill being taught (e.g., all but one data point are above baseline); however, the trajectory of the available data points is only slightly upward, approximately parallel to the aim line. While this would represent progress with skill acquisition, it is not “sufficient progress” to enable the student eventually to attain the benchmark level of performance (e.g., a trend line drawn with all available data points would not intersect the aim line, as seen below).

The conclusion drawn would be that Intervention #1 is not effective in producing the rate of progress desired for this student. The situation changes dramatically with Intervention #2 (Tier 3), where the student’s performance increases sharply and is on a clear path to intersect the aim line and attain the benchmark.
Once an intervention has been implemented, how can the CPS team distinguish a positive, from a questionable, from a poor response to intervention? A few simple principles should assist the team in making this determination. A positive response to intervention is one in which the progress monitoring data show a clear reduction in the gap between the student’s observed level of performance and the expected level of performance (e.g., the standard); the point at which the student’s performance will meet expectations can also be clearly extrapolated on the progress monitoring graph (see graphic below). In the vast majority of cases, visual inspection of the progress monitoring graphs will be sufficient to determine whether the student’s response to intervention is positive, questionable, or poor.
A *questionable* response to intervention is one in which the performance gap is closing, but the point at which the student’s performance will meet expectations is not able to be extrapolated on the progress monitoring graph (e.g., the lines representing observed performance and expected performance are essentially parallel after intervention). This would represent progress, but not “sufficient” progress toward the goal (see graphic below).
A *poor* response to intervention is one in which the performance gap continues to widen, even after intervention (e.g., the distance between the lines representing observed and expected performance is growing larger). See graphic below.

It is necessary that all CPS team members understand how to detect positive, questionable, and poor responses to intervention. It is also necessary that this information be linked to key decisions about next steps for intervention planning. What should be the next steps for the CPS team when they see positive, questionable, or poor responses to intervention? The following decision rules should aid in determining actions that need to be taken:
If the response to intervention is **positive:**
- Continue the intervention until the student reaches benchmark (at least)
- Then fade the intervention to determine if the student has acquired functional independence with the skill/behavior

If the response to intervention is **questionable:**
- Increase the intensity of the current intervention for a short period of time and assess impact
- If performance improves, continue; if performance does not improve, return to problem solving

If the response to intervention is **poor:**
- Return to problem identification/analysis to see if the problem is identified correctly and/or a new intervention is needed

**Florida’s Statewide PS/RtI Model**

The Florida Department of Education (FLDOE) has suggested that districts and schools organize their work in three stages or areas: consensus, infrastructure, and implementation. These three stages can be described as follows:

- **Consensus:** Consensus building with implementers and the broader community around RtI concepts and the foundational “whys.”
- **Infrastructure:** Districts and schools examine their current practices against the critical components of RtI and determine what is currently in place and what gaps need to be addressed.
- **Implementation:** Structures and supports are put in place for RtI to be enacted with fidelity (adapted from *Response to Intervention: Blueprints for Implementation: District Level*, National Association of State Directors of Special Education, Inc., 2008).

The FLDOE has indicated that each Florida district should have a District-Based Leadership Team (DBLT) and each school should have a School-Based Leadership Team (SBLT) that is responsible for RtI implementation. In Broward, the district has a DBLT composed of individuals from a variety of key professions; and each school has a Collaborative Problem Solving (CPS) team with core members (and other members included as needed) who are responsible for implementing the Broward CPS/RtI Model. The recommended composition of CPS teams may be found in Appendix C.
Broward’s CPS/RtI Model: Key Components

There are six key components to the Broward CPS/RtI model:

1. **Serving Students Well**

   The Broward CPS/RtI model has as its fundamental goal the assurance of success of every student by differentiating instruction and providing successively more intensive assistance based on student need through a tiered system of interventions (MTSS). Academic and behavioral needs are addressed using interventions that are grounded in best practice.

2. **Data-driven Decision Making**

   Students are continuously monitored to determine their progress toward mastery of core content and strategies are employed to help them meet standards. Students’ progress is assessed through a variety of means and the assessment results drive decision-making about best teaching practices to assist in a student’s learning. Instruction is delivered in large groups, small groups and individually. Students’ behavior is assessed through a variety of means and the assessment results drive decision-making about how to assist with student behavior. Interventions occur in large groups, small groups and individually.

3. **Collaborative Problem Solving (CPS)**

   A CPS model is employed to ensure that the decisions made about what a group of students or an individual student needs, academically or behaviorally, draw on a number of sources. The CPS team uses assessment data to determine how a student or students are progressing and what type of interventions might be needed. CPS teams include administrators, a school psychologist, school counselor, school social worker, parents, and teachers with expertise in each of the core content areas: ELA/reading; mathematics; science; and social studies. Additional teachers, other specialists, and the student (when developmentally appropriate) may be added to the team as needed.

4. **On-going Assessments of Student Learning**

   Formative assessments are an important vehicle for monitoring the progress of a student. Assessments must be frequent and connected to the content and standard a student is working to master. Assessments drive the decision-making about the best instructional strategy or approach to use with a student to further learning.

5. **Interventions and Documentation of Results**

   Interventions are based on assessments and the success of an instructional strategy is documented to determine what is helping a student learn. Evidence-based strategies in instruction and behavioral management are used to increase the learning
of each student. Intervention records and progress monitoring graphs are retained by the CPS team as documentation of what methods have been used and how effective they have been in fostering progress.

6. District Support and Professional Development

District support for implementation and capacity building includes staff members at each level who provide professional development, support, and coaching for school-based staff. Professional development will help educators at all levels understand the RtI process and become proficient at instructional practices that promote student success, assessments that will help determine what instructional strategies or interventions would best support a student’s learning, and interventions that are most likely to help a struggling student accelerate learning and master content and standards. Other professional development will support CHAMPs, the school-wide behavior management system employed across the district, and effective CPS strategies.
# APPENDIX A
## COLLABORATIVE PROBLEM SOLVING (CPS) TEAM BENCHMARK CHECKLIST

**Instructions:** This checklist is designed to provide administrators and others with an evaluation tool to determine the extent to which a school is implementing a CPS team approach. The evaluator should collect data on the benchmarks through observation of team activities, review of team documents, and direct report by participants and consumers.

**Rating Scale:**
1 = No evidence  
2 = Minimal evidence of implementation  
3 = Evidence showing beginning efforts toward implementation (e.g., scheduled training, planning sessions)  
4 = Documented evidence of implementation with missing elements (nonessential) or inconsistencies  
5 = Documented evidence of full and consistent implementation

<table>
<thead>
<tr>
<th>BENCHMARK</th>
<th>RATING</th>
<th>EVIDENCE</th>
<th>COMMENTS</th>
</tr>
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<tbody>
<tr>
<td>Teachers clearly understand that the CPS team is a regular education, rather than a special education, process and they can explain how it works.</td>
<td>1 2 3 4 5</td>
<td>Ask a teacher what the team is intended to do and how it works, especially how to access help from the team.</td>
<td><em>Measures: Essential Element 1</em></td>
</tr>
<tr>
<td>Teachers have reviewed records, defined the problem based on data, implemented substantive interventions, and measured progress before they meet with the team.</td>
<td>1 2 3 4 5</td>
<td>Review Intervention Record forms for written descriptions of these steps of the process. Observe a team meeting noting whether the teacher’s presentation includes information indicating that she has performed these steps.</td>
<td><em>Measures: Essential Element 2</em></td>
</tr>
<tr>
<td>A staff member assists the teacher in defining the problem and throughout the intervention steps.</td>
<td>1 2 3 4 5</td>
<td>Review Intervention Record forms for documentation identifying staff members who are providing support. Ask one of these staff members about how he/she provided assistance.</td>
<td><em>Measures: Essential Elements 1/2</em></td>
</tr>
<tr>
<td>The principal or an assistant principal is an active participant in team activities.</td>
<td>1 2 3 4 5</td>
<td>Ask the principal or AP about the current status of team operations. He/she should be able to describe the problem solving steps and the current strengths and weaknesses of the team. It should be clear that the administrator is responding based on direct observation of team activities.</td>
<td><em>Measures: Essential Element 3</em></td>
</tr>
<tr>
<td>BENCHMARK</td>
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<tr>
<td>The following are members of the core team and attend whenever the team</td>
<td>1</td>
<td>Review a sample of Intervention Record forms to see which team members consistently attend meetings.</td>
<td><strong>Measures: Essential Element 4</strong></td>
</tr>
<tr>
<td>meets: Administrator Student’s teacher Guidance Counselor Reading</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Specialist Other teacher Psychologist Social Worker</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 2 3 4 5</td>
<td>4</td>
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<tr>
<td>5</td>
<td></td>
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<tr>
<td>The team has met at least 4 times during the past 2 months.</td>
<td>1</td>
<td>Review the team’s meeting schedule or sample Intervention Record forms. If a team does not meet, one can assume that there is not a functioning team.</td>
<td><strong>Measures: Essential Element 4</strong></td>
</tr>
<tr>
<td>Parent participation is evident throughout the entire problem solving</td>
<td>2</td>
<td>Review a sample of Intervention Record forms for parent contact dates or other parent conference documentation.</td>
<td><strong>Measures: Essential Element 5</strong></td>
</tr>
<tr>
<td>process.</td>
<td>3</td>
<td></td>
<td></td>
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<tr>
<td>1 2 3 4 5</td>
<td>4</td>
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<tr>
<td>Team meetings are run efficiently with assigned roles (e.g., recorder,</td>
<td>1</td>
<td>Observe a meeting for structure and focus. Review Intervention Record forms to see if the team is producing intervention plans that clearly describe what is supposed to happen.</td>
<td><strong>Measures: Essential Element 6</strong></td>
</tr>
<tr>
<td>timekeeper), time-limited tasks, and production of an intervention plan.</td>
<td>2</td>
<td></td>
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<tr>
<td>1 2 3 4 5</td>
<td>3</td>
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<tr>
<td>The team monitors its effectiveness and takes steps to correct any</td>
<td>1</td>
<td>Ask when the team last allocated a block of time to discuss the efficiency and effectiveness of its operations. Ask how the team is looking at intervention evaluation data to determine what’s working and in what areas the team may need to improve upon its procedures or develop additional interventions.</td>
<td><strong>Measures: Essential Element 7</strong></td>
</tr>
<tr>
<td>deficiencies identified.</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 4 5</td>
<td>4</td>
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<tr>
<td>The interventions used are matched to the target problem and based on</td>
<td>1</td>
<td>Review a sample of Intervention Record forms and compare the identified target problem with the description of interventions planned. Ask team members what resources they are using to identify evidence-based interventions for academic and behavioral problems (e.g., Struggling Reader Chart, websites, or resource collections such as the R.I.D.E. program).</td>
<td><strong>Measures: Essential Elements 8/11</strong></td>
</tr>
<tr>
<td>evidence of effectiveness.</td>
<td>2</td>
<td></td>
<td></td>
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<tr>
<td>3 4 5</td>
<td>4</td>
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**BENCHMARK**

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<th>COMMENTS</th>
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<tr>
<td>1 2 3 4 5</td>
<td>Review a sample of <em>Intervention Record</em> forms for specific pre- and post-measures of the target problem. Team members should be able to describe the connections between data collected and decisions that were made about supports for the student.</td>
<td><em>Measures: Essential Elements 9/10/13</em></td>
</tr>
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</table>

**Rater(s):** _____________________________________  **Date:** ___________  **School Rated:** ________________________________________

**GENERAL INTERPRETIVE GUIDE**

*Many 1s and 2s are circled:* A highly ineffective or dysfunctional CPS team (This team will need to address all aspects of CPS to become effective).

*The majority of ratings are 3s:* A CPS team that is currently limited in its effectiveness, but has begun the process of team development (The ultimate success of this team will depend on continued improvements in areas of need and sustainability of those improvements).

*One or more 4s are circled along with 5s in other areas:* A CPS team that has specific needs for improvement (For example, the team meets regularly, has a consistent membership, and addresses student problems in a timely manner, but fails to design, implement, evaluate, and/or keep written records of data-based interventions. This team should focus its efforts on improving specific areas of inefficiency, while maintaining the strengths it has already developed).

*All 5s are circled:* A highly effective CPS team (This team should focus on sustaining its strengths).
APPENDIX B
THREE-TIERED MODEL OF SCHOOL SUPPORTS

Three-Tiered Model of School Supports & the Problem-Solving Process

ACADEMIC SYSTEMS

Tier 3: Comprehensive & Intensive Students who need individualized interventions.

Tier 2: Strategic Interventions Students who need more support in addition to the core curriculum.

Tier 1: Core Curriculum All students, including students who require curricular enhancements for acceleration.

BEHAVIOR SYSTEMS

Tier 3: Intensive Interventions Students who need individualized intervention.

Tier 2: Targeted Group Interventions Students who need more support in addition to school-wide positive behavior program.

Tier 1: Universal Interventions All students in all settings.

(Florida Department of Education, 2008)
APPENDIX C

CPS CORE/SUPPLEMENTAL TEAM COMPOSITION

**CORE TEAM**

Administrator (Principal or Assistant Principal)

Teacher(s) of the student referred to the CPS team

School counselor

School psychologist

School social worker

Reading specialist or coach (for all cases involving reading problems)

Math specialist or coach (for all cases involving math problems)

Parents (may be invited; may still proceed with CPS if they decline to participate)

****************************************************************************************************************************************

**SUPPLEMENTAL MEMBERS**

Other specialists as needed (e.g., behavior specialist, SLP, zone support personnel, etc.)

ESOL contact/coordinator as needed

Student (when developmentally appropriate)
**APPENDIX D**

What RtI Requires/Existing Broward Structures and Resources

<table>
<thead>
<tr>
<th>What RtI Requires</th>
<th>Existing Broward Structures and Resources</th>
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<tbody>
<tr>
<td>1. The infrastructure for RtI is a problem-solving model.</td>
<td>Broward has had Collaborative Problem Solving (CPS) teams at every school for over a decade; the essential charge to CPS teams is to assist teachers in the classroom with students who are struggling with academic and/or behavior problems. The CPS team is the central repository for academic and/or behavioral concerns about general education students and it is the primary vehicle by which interventions are planned, implemented, progress monitored, and evaluated—that is, the CPS team is the School-Based Leadership Team mentioned in all Florida DOE RtI materials and the means by which RtI is carried out in the Broward Schools. <strong>Existing Resources:</strong> Links also on the Psychological Services website/Resources page 1. CPS/RtI Manual <a href="http://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a> 2. CPS Flow Chart <a href="http://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a> 3. CPS/RtI Basics Training Module <a href="http://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a> 4. RtI Essentials Training Module <a href="http://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a> 5. RtI Essentials: Behavior Module <a href="http://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a> 6. CPS Benchmark Checklist <a href="http://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a></td>
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<tr>
<td>2. A tiered system (Tier 1, Tier 2, Tier 3) of intervention delivery that becomes more intensive as the student moves up the Tiers (e.g., as the student’s problems become more chronic and/or severe).</td>
<td>The majority of CPS teams have received at least an introduction to the tiered system of intervention delivery via their Area Office of Student Services, student services personnel at their school, or Psychological Services. Additional training opportunities will be forthcoming. <strong>Existing resources:</strong> Links also on the Psychological Services website/Resources page 1. CPS/RtI Basics Training Module <a href="http://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a> 2. RtI Essentials Training Module <a href="http://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a> 3. RtI Essentials: Behavior Module <a href="http://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a></td>
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3. Knowledge of evidence-based interventions that are proven to work for both academic and/or behavior problems.

Teachers and CPS team members can avail themselves of many existing resources, both from internal Broward sources and from external sources, to gain knowledge of evidence-based interventions for students’ academic and/or behavior problems.

**Existing Resources:** Internal Broward sources
1. Struggling Reader Charts
2. Struggling Math Chart
5. CHAMPs Training Modules

**Existing Resources:** External sources
1. Intervention Central [www.interventioncentral.org](http://www.interventioncentral.org)
4. Florida RtI [www.floridarti.usf.edu/index.html](http://www.floridarti.usf.edu/index.html)

4. Skills to implement evidence-based interventions.

Classroom teachers and members of the CPS team will need to become increasingly familiar with implementation requirements and delivery of evidence-based interventions, both for academic areas and behavior management. This is a developmental process, requiring commitment to mastering methods of instruction and behavior management that have a proven track record of success. On-going training and coaching in such methods should be managed by the CPS team.

**Existing Resources:** Internal Broward sources
1. District curriculum specialists (Instruction and Interventions Department)
2. Psychological Services (Call: 754-321-3470)
3. CPS team members at your school
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<tr>
<td>5. Effective data collection, progress monitoring, and evaluation of interventions.</td>
<td>This is the heart of the RtI component of CPS/RtI. At Tiers 2 and 3, the CPS team needs to oversee collection and interpretation of progress monitoring data directly related to the student’s defined problem(s). These data need to have a clear baseline period, a sufficiently lengthy intervention period (e.g., 4-6 weeks), and should be displayed graphically for ease of comparison between baseline and intervention to establish degree and sufficiency of rate of progress.</td>
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<tr>
<td>6. Accurate decision-making based on the data from interventions.</td>
<td>Planning, implementation, and progress monitoring of evidence-based interventions will have limited impact if those charged with their oversight do not use the data generated to make accurate decisions about student progress. CPS team members should assure that the data accumulated from Tier 2 and 3 interventions receive timely and sufficient analysis to make accurate and meaningful decisions about student progress; including changes to interventions when needed, smooth transitions among the Tiers, and referral for evaluation for ESE services when warranted.</td>
</tr>
<tr>
<td></td>
<td><strong>Existing Resources:</strong> Internal Broward sources 1. CPS/RtI Manual <a href="https://www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm">www.broward.k12.fl.us/studentsupport/psychologicalservices/html/CPS_RTI.htm</a> 2. District curriculum specialists (Instruction and Interventions Department) 3. Psychological Services (Call: 754-321-3470) 4. CPS team members at your school 5. ESE Specialist at your school</td>
</tr>
<tr>
<td>7. A systematic connection to referral for evaluation and ESE (e.g., after all intervention attempts have proven unsuccessful and the student is still failing to respond appropriately).</td>
<td>According to Florida DOE regulations, nearly all students who are struggling with either academics and/or behavior should receive interventions in the general education classroom prior to referral for evaluation for ESE services. Such interventions should be implemented systematically, at Tier 2 first, and if unsuccessful, at Tier 3. At least 3 disability areas (E/BD, SLD, and LI) now require RtI data in the form of discrepancy from age- or grade-level standards and progress monitoring of response to intervention in the general education classroom as part of the eligibility determination for ESE. Hence, nearly all students with either learning, language, and/or behavior problems who are suspected of having a disability will need to have RtI data collected and analyzed as part of the eligibility determination—that is, prior to, or concurrent with, referral for evaluation.</td>
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APPENDIX E

FREQUENTLY ASKED QUESTIONS

Broward CPS/RtI Model

**Q:** Why are we changing the way we make decisions about instruction for students?

**A:** Evidence from research continues to indicate that response-to-intervention (RtI) is the best means of assisting students in the general education classroom with academic and/or behavioral problems. It is a means of identifying problems early, providing assistance to students through evidence-based interventions, and progress monitoring those interventions to evaluate their effectiveness. Decisions about student’s instructional needs are, thus, based on sound data about what is and is not working to promote academic and behavioral competence in the classroom. The state of Florida has adopted RtI as its primary methodology for assisting all students experiencing challenges in the general education classroom.

**Q:** Is this a new way to staff students for special education?

**A:** No. Although RtI has some applicability to certain ESE eligibilities, it is first and foremost a general education initiative.

**Q:** How will we communicate about CPS/RtI to parents?

**A:** This is one of the responsibilities of the CPS team at each school. Regular communication with parents, both about interventions planned and progress monitoring of the interventions, is expected. It will be necessary for all CPS teams to determine who will be responsible for communicating with parents about their child’s involvement in the CPS process. A brochure for parents is available on the Psychological Services website.

**Q:** Is there flexibility in the model? For example, can our school implement a different behavior management model instead of CHAMPs?

**A:** In some areas, yes; in others, only after use of district approved methods. For behavior management in particular, there is flexibility. While the district strongly recommends CHAMPs as the universal behavior management system, a school could use a different method, so long as they have a clearly identified school-wide approach to classroom management. In some academic areas, most notably reading, there is somewhat less flexibility; those methods identified in the Struggling Reader Charts should be used first, prior to trying other methods of intervention.

**Q:** Will there be technology to support the documentation of assessments, instruction, interventions and decisions?

**A:** Yes. The BASIS system is already operational for all Tier 1 data analysis tasks required in schools; Tiers 2 and 3 are currently under construction and should be available during the 2012-13 school year.
**Serving Students Well**

**Q:** If our school is an “A” school do we need to implement the Broward CPS/RtI model?  
**A:** Yes. Even in “A” schools there are individual students who struggle with academics and/or behavior. CPS/RtI would be required to address these students’ needs in the classroom.

**Q:** If our school is meeting AYP do we need to implement the Broward CPS/RtI model?  
**A:** Yes; for the same reasons noted in the above response.

**Q:** Is the CPS/RtI model about struggling or underperforming students only? What if a student is mastering content more quickly than his/her classmates? Are they referred to the CPS team?  
**A:** Yes, CPS/RtI is primarily intended for struggling students. A method already exists for making referrals for students suspected to be gifted.

**Q:** Are we only concerned about student achievement in reading and math or are other content areas addressed in the CPS/RtI process?  
**A:** While reading and math are among the first areas that should be addressed by the CPS/RtI process, all academic areas (e.g., writing, social studies, science), as well as behavior problems, should also be addressed by the CPS team at the school, using the RtI methodology.

**Data-driven Decision Making**

**Q:** How can we distinguish a Tier 1 intervention from a Tier 2 intervention from a Tier 3 intervention?  
**A:** Tier 1 methods are “universal” (e.g., what all students receive; the core curriculum); Tier 2 interventions are “strategic/targeted,” intended for at-risk students who are struggling with either academics and/or behavior (e.g., for students who need small group, supplemental instruction in their area of difficulty; Tier 3 interventions are “intensive,” intended for students who need highly focused and intensive instruction in their area of difficulty. The essential change as the student moves up the Tiers is one of “intensity” of intervention (see pages 9-11 for a more thorough discussion of the three Tiers of intervention).

**Q:** How do we determine if the problem requires a Tier 1, 2, or 3 strategy?  
**A:** See discussion on pages 11-14 for an explanation of how to determine the appropriate level of intervention needed to address a student’s problem(s).

**Q:** How can we tell if a student’s response to an intervention is sufficient?  
**A:** See discussion on pages 15-20 about how to distinguish positive, questionable, and poor responses to intervention.
**Collaborative Problem Solving**

**Q:** Can my School-Based Leadership Team be my CPS team?
**A:** In Broward, the CPS team is defined as the School-Based Leadership Team for MTSS/RtI.

**Q:** Who is supposed to participate in the CPS team meetings?
**A:** See Appendix C for composition of the core CPS team, and supplemental members as needed. At minimum, the core members of the CPS team should always participate in meetings.

**Q:** Do we need parent permission to implement interventions designed by the CPS team?
**A:** No. While parent participation may always be invited and encouraged, informed consent is not required for CPS activities.

**On-going Assessments of Student Learning**

**Q:** How do we know our assessments match the core content standards?
**A:** For reading and math, simply consult the *Struggling Reader Charts* and the *Struggling Math Charts*. For other academic content areas, this will require consultation with your grade level chair, department chair, and/or curriculum specialists at the District level.

**Q:** Are teacher-made assessments or informal, in-class assessments an appropriate way to determine if a student is making progress?
**A:** While teacher-made assessments may provide the teacher with good information about students' skill development, they are generally not appropriate for progress monitoring of RtI.

**Interventions and Documentation of Results**

**Q:** How do we document what interventions have been tried with a student?
**A:** The District requires that all CPS teams use the *Intervention Records* developed by Psychological Services. A copy may be obtained on the Psychological Services website, from the “Forms” page (also see link to this form in Appendix D). These forms will be automated on the BASIS system, likely during the 2012-13 school year.

**Q:** How do we document the level of progress being made with interventions that are tried?
**A:** Progress is documented using the progress monitoring graphs generated as a required component of all Tier 2 and 3 interventions. The graphs should be attached to the *Intervention Record* mentioned above, so the CPS team will have a complete record of the student’s responses to all interventions attempted.
Q: Where do we find evidence-based interventions to use for specific student problems?
A: For reading and math, on the Struggling Reader Charts and Struggling Math Charts. For all other areas, see resources listed in Appendix D.

District Support and Professional Development

Q: What involvement will District staff have in CPS/RTI?
A: A variety of district departments and personnel will have a primary role in planning and implementation of RtI in the Broward Schools. CPS team members will also play key roles in implementation and assistance with RtI methods in the schools.

Q: Will there be on-line opportunities to get training and/or information about CPS/RTI?
A: Yes. Many of the training opportunities will be made available through podcasts and on-line training modules.
APPENDIX F
RtI FOR ENGLISH LANGUAGE LEARNERS

In implementing RtI approaches with English Language Learners (ELLs), a significant challenge is determining students’ knowledge and skills in their first language and then understanding their performance in their second language (English). RtI has the potential to affect positive change for ELLs by requiring the use of research-based practices based on individual children’s specific needs. All ELLs, however, need culturally and linguistically appropriate instruction, no matter the educational setting. In other words, instruction and interventions must consider a student’s cultural background and experiences as well as their linguistic proficiency (in both English and the native language) in order for instruction to be appropriate.

Q: How can I tell the difference between a reading “disability” and reading difficulties in ELLs?
A: ELLs need explicit, intensive instruction to support their word reading skills, whether they have a reading disability or not. If they respond to this instruction (Tier 1, Tier 2), the difficulties that they are having are not due to a “disability”. The majority of ELLs develop word-reading skills that are equally as accurate and fluent as their classmates, without any significant delays. However, these same children often have low English vocabulary knowledge and reading comprehension skills.

Q: What skills must educators have to effectively implement RtI for ELLs?
A: Personnel need to know about the development of oral language, early literacy, students’ home language, contextual considerations, and the cultural background of students.

Q: How is progress monitoring effectively implemented with ELLs?
A: Monitor ELLs’ progress as frequently as the other students. Consider students’ accents and pronunciations when scoring English measures and provide appropriate interpretations when words are mispronounced. Do not penalize students for dialect features. When making comparisons to the peer group, the appropriate reference group is other ELLs with similar language classifications and background characteristics, not same-age peers in the classroom from the dominant culture.

Q: How is Tier 1 instruction effectively implemented for ELLs?
A: Do not wait for English oral language to meet grade-level expectations before providing reading instruction. Provide instruction in early reading while also providing support for English oral language development. Integrate academic language into core instruction across subject areas.

Q: How is Tier 2 intervention effectively implemented for ELLs?
A: Do not wait for English oral language to improve before providing supplemental reading intervention to students who demonstrate weak reading skills or have evident reading difficulties in English.
Q: How is Tier 3 intervention effectively implemented for ELLs?
A: This level of intervention needs to be provided by a teacher (or other professional) with a strong background in literacy and an understanding of the educational needs of ELLs. Strategies and instructional routines such as repetitive language, modeling, time to practice and discuss reading, and systematic and explicit instruction are beneficial with ELLs who have reading difficulties. Consult the Multicultural, ESOL, and Program Services Department, or a bilingual psychologist assigned to your school, if you have questions about Tier 3 interventions with ELLs.

Web Sources and Resources

Language Level Classifications and Descriptions

ESOL Instructional Strategies Matrix
http://www.broward.k12.fl.us/esol/Eng/ESOL/PDF/Handbook/Appendices/Appendix%20L%20MATRIX.pdf

Description of Supplementary Materials

National Center on Response to Intervention

Florida’s Response to Intervention
http://www.fldoe.org/Schools/florida-reponse-to-intervention.asp

Florida Center for Reading Research
http://www.fcrr.org/

RtI Network
http://www.rtinetwork.org/Learn/Diversity/ar/EnglishLanguage

The National Center for Culturally Responsive Educational Systems (NCCREST)
www.nccrest.org/Briefs/Framework_for_RTI.pdf

APPENDIX G

Case Example: Jackson

Tier 1 (Universal)

Jackson is a 7-year-old boy in first grade; his teacher is Ms. H. Jackson is currently receiving Tier 1 general education instruction in reading using the Treasures reading curriculum. His class receives reading instruction 5 days a week for 90 minutes each day. Jackson and his classmates spend 15 minutes, 3 days per week on Earobics.

Jackson is struggling in reading and has had difficulty in this area since kindergarten. Ms. H has concerns regarding Jackson’s progress in reading this year. He is performing below benchmark and below his peers as evidenced through his classroom performance, curriculum-based assessment, and standardized measures (Treasures Assessment score was below 70%, FAIR results from September 2009 indicate a PRS score of 13 – “Red Zone”). Ms. H and the Reading Coach have observed that Jackson’s word decoding is labored. When reading aloud, Jackson often guesses (incorrectly) at words based only on the first letter. His teacher describes Jackson as a cooperative and hard working student; no behavioral concerns are reported.

The teacher reviewed Jackson’s cumulative school record to consider any factors present that might be causing or impacting his problems with reading. Vision and hearing screenings were passed during the last semester of Kindergarten. Jackson’s report card from Kindergarten indicated below level performance in reading; all other areas, including behavior, were on-level or within the expected range. School attendance was adequate (Jackson was absent 3 days during the 2008-09 school year).

Ms. H consulted with her colleagues in the 1st grade team and with the Reading Coach. She shared the data supporting her concerns regarding Jackson’s reading progress (e.g., FAIR and Treasures assessment results, Earobics scores, classroom-based measures, including benchmark and peer data for comparison). The Struggling Readers Chart was used as a reference tool for identifying appropriate and relevant interventions. Ms. H was able to gain some additional strategies for reading instruction that were implemented in providing differentiated instruction to all students in the classroom (e.g., “Road to the Code” was added for supplemental instruction in phonemic awareness).

The teacher also reviewed the Class Status Report (from the FAIR Broad Screen data) and subsequently formed reading groups for classroom instruction. Jackson was placed in a small group (Triumphs Intervention within the 90-minute reading block) with other students who demonstrated difficulty with letter/sound correspondence (decoding). Despite this strategy, Jackson continued to demonstrate difficulty in reading.

Ms. H met with Jackson’s parents to describe and document her concerns with his reading progress, and to explain the RtI Process. She was also able to interview the parents regarding any medical history or other concerns that might be impacting Jackson’s ability to perform in reading. No health or behavioral concerns were reported by the parents. Jackson’s parents...
have observed him having difficulty with homework assignments in reading, particularly when he attempts to read independently.

The teacher then brought her concerns about Jackson’s reading progress (supported by data from FAIR, Treasures Assessment, Earobics scores, documented observations, and parent-provided information) to the Collaborative Problem-Solving (CPS) Team at the school and she continued to consult with her grade level colleagues. The team determined that the interventions Ms. H currently had in place were appropriate, yet Jackson continued to perform at the below grade level benchmark and below his classroom peers in reading.

**Tier 2 (Strategic)**

Based on an analysis of the data provided by the teacher, the school staff (the classroom teacher, grade level team, school CPS team) determined that Jackson should begin to receive Tier 2 supplemental interventions in reading in addition to the Tier 1 (Universal) interventions that were currently in place. Diagnostic measures were needed in order to identify Jackson’s specific problem (skill deficit) in reading so that interventions known to be effective with that problem could be implemented. For this purpose, the *Diagnostic Assessments of Reading* (DAR) was administered along with analysis of Jackson’s performance on FAIR. Deficits in Letter/Sound Correspondence were identified and were determined to be the focus of Tier 2 Intervention.

Ms. H administered a 10-item Nonsense Word list to Jackson and to his classmates as a baseline measure of Letter/Sound Correspondence skills. Nonsense word reading is a research-based measure of decoding skills. A percentage of accuracy score for each student was recorded. Benchmark expectation was also noted.

Strategic Tier 2 Interventions included: For 20 minutes per day/5 days per week, Ms. H provided reading instruction in letter-sound correspondence/decoding to Jackson and 3 other students using Triumphs Intervention in addition to the daily 90-minute reading block. Additionally, Jackson’s sessions on Earobics were increased to 5 days per week (15 minutes per session).

Jackson’s response to Tier 1 and Tier 2 interventions was monitored over a 12-week period. His teacher administered a 10-item Nonsense Word list to Jackson every 2 weeks and recorded his accuracy score in order to document progress/response to intervention. Ms. H also administered the same Nonsense Word list to the entire class every four weeks in order to monitor classwide performance with decoding skills so that Jackson’s progress could be compared to peers. Jackson’s scores, along with the average scores of peers and benchmark expectations in nonsense word decoding, are shown in the table below.
Jackson’s Tier 2 Nonsense Word Accuracy Scores (in percents)

<table>
<thead>
<tr>
<th>Date of Assessment</th>
<th>Jackson’s Score</th>
<th>Peer Score (Average)</th>
<th>Benchmark</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/08/09</td>
<td>30</td>
<td>45</td>
<td>50</td>
</tr>
<tr>
<td>09/12/09</td>
<td>31</td>
<td></td>
<td>50</td>
</tr>
<tr>
<td>09/25/09</td>
<td>35</td>
<td></td>
<td>55</td>
</tr>
<tr>
<td>10/09/09</td>
<td>39</td>
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<td>60</td>
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<td>10/23/09</td>
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<td>11/07/09</td>
<td>55</td>
<td>70</td>
<td>70</td>
</tr>
<tr>
<td>11/21/09</td>
<td>62</td>
<td></td>
<td>80</td>
</tr>
<tr>
<td>12/08/09</td>
<td>69</td>
<td>75</td>
<td>80</td>
</tr>
</tbody>
</table>

Performance data were recorded by the teacher in a table format similar to the one above. A line graph depicting the above information was created by a member of the CPS team to serve as a tool for sharing these data in a meaningful way with parents and members of the CPS team (see attached graph). Ms. H continued to consult with the grade level team and to report Jackson’s progress. She also communicated with Jackson’s parents at regular intervals regarding his progress. At the end of the 12-week period, Jackson was performing at a level near both his peers and the grade level benchmark in word decoding. Based on an analysis of the data (scores on the Nonsense Word Accuracy measure), it appeared that Jackson was responding positively to the interventions implemented at Tier 2.

Because Jackson was making adequate progress (the gap between his performance and expectation was closing significantly), the teacher, grade level team, and the CPS team determined that Jackson should continue with intervention until the benchmark was attained. At that point, it would be considered to have him discontinue Tier 2 strategies. However, if Jackson’s reading skills appear to decline at Tier 1, the Tier 2 interventions (e.g., small group instruction in addition to the 90-minute reading block) would be re-instated.

Written records (e.g., Intervention Record, progress monitoring graphs, etc.) of Jackson’s responses to Tier 2 interventions were maintained by the teacher and were placed in his cumulative school record for future reference.

**Resources utilized:**

Florida Center for Reading Research [www.fcr.org](http://www.fcr.org)
Florida Department of Education [www.fldoe.org](http://www.fldoe.org)
National Research Center on Learning Disabilities [www.nrcld.org](http://www.nrcld.org)
Reading Rockets, U.S. Department of Education [www.ReadingRockets.org](http://www.ReadingRockets.org)
**The School Board of Broward County, Florida**

**Intervention Record—Academic**

<table>
<thead>
<tr>
<th>Student:</th>
<th>Jackson</th>
<th>DOB:</th>
<th>9/1/02</th>
</tr>
</thead>
<tbody>
<tr>
<td>School:</td>
<td>Anywhere Elementary</td>
<td>Grade:</td>
<td>1st (09-10)</td>
</tr>
<tr>
<td>Teacher(s):</td>
<td>Ms. H</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Review of Tier 1 Intervention(s): Core Curriculum and Strategies**

<table>
<thead>
<tr>
<th>Targeted Skill(s)/Area(s) of Concern:</th>
<th>Describe Concerns/Difficulties:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ Reading</td>
<td>Treasures assessments &lt;70%</td>
</tr>
<tr>
<td>☑ Mathematics</td>
<td>FAIR PRS = 13; Red Zone</td>
</tr>
<tr>
<td>☑ Writing</td>
<td>Earobics scores below average</td>
</tr>
<tr>
<td>☐ Other (e.g. science, social studies, etc.)</td>
<td></td>
</tr>
</tbody>
</table>

**Strategies Used in the General Education Classroom During Academic Instruction:**

| ☑ differentiated instruction | ☑ direct teaching | ☑ modeling |
| ☑ paraprofessional assistance | ☑ parent volunteer | ☑ peer tutoring |
| ☑ core curriculum interventions | ☑ small group instruction | ☑ team teaching |
| ☑ technology support | ☑ volunteer assistance | ☑ ESOL strategies |
| ☑ other: ________ | | |

**Skill(s) taught by:** Ms. H, Classroom Teacher 9/10/09

**Parent contacted to discuss area(s) of concern for this student by:** Ms. H, Classroom Teacher 9/10/09

☐ Tier 1 Intervention(s) were not successful:

- Percent of students in this grade level achieving grade level benchmarks: >74.
- Percent of students in this class achieving grade level benchmarks: >74.
- Review cumulative folder, test scores, IIRIs, parent conferences, etc. Interview previous teachers. Confer with parents. Check for recent vision and hearing screenings—refer for screening if needed. Check for recent (within one year) language classification, if applicable.
- Request assignment of case manager to assist with interventions.

**Case manager assigned:** Ms. B, Reading Coach

**Administrator checklist:**

- Tier 1 is effective with approximately 75% to 80% of this class. ☑ Yes ☐ No*
- Tier 1 is effective with approximately 75% to 80% of this grade level. ☑ Yes ☐ No*

*Tier 1 should be effective for approximately 75% to 80% of the class/grade level. If not, CPS and/or school administration need to review and make necessary adjustments to the Tier 1 curriculum and/or implementation.*
Student: Jackson

Tier 2: Implementation of Targeted Group Academic Intervention(s)

Meeting Date 9/4/09

Information from Records & Interviews [What did review of the student’s records, and communications with other involved persons, add to understanding the problem?]

Review of records indicates problems in reading since kindergarten. Vision and hearing screenings passed. No school attendance or behavioral problems. No health concerns.

Objective Data Collection [Describe the available data that help define the problem: e.g. work samples, test scores, etc.]

FAIR, September 2009 PRS = 13 (Red Zone); Earobics scores below average/below peers; Treasures assessments below 70%; DAR and FAIR used for diagnostics (printouts attached).

What do the data suggest is the likely cause of the problem? (Problem Hypothesis)

Skill deficits; phonemic awareness and acquistion of phonics skills (letter-sound correspondence is particularly low).

Collect and graph the data that show the performance of the student compared to grade and peer benchmarks for the target skill (related to the cause of the problem above) before intervention (baseline). Use the same appropriate and objective measurement tool for each data point in the graph (e.g. number or percent of vocabulary test items correct; how many words correct per minute on equivalent forms of a fluency test; etc.)

Tier 2 Evidence-Based Intervention(s) to be Implemented in Addition to Tier 1 [Refer to Struggling Reader Chart, Struggling Math Chart, Intervention Central or other web sites]

Triumphs; Earobics

Skill(s) to target Phonics skills (letter-sound correspondence)

Who will implement the intervention? (i.e. interventionist) Ms. H, classroom teacher

Where will the intervention take place? General education classroom

Frequency and length of sessions 30 minute sessions; 5 days/week

Materials needed Triumphs; Earobics

Progress monitoring tool [if possible use same tool as for baseline data above] Percent correct on nonsense word reading list administered weekly.

Person(s) responsible for progress monitoring Ms. H (assist by Reading Coach)

How often and for how long will progress be monitored? 12 weeks

Numerical goal (e.g. 35 words correct per minute; 75% on vocabulary tests) 80% correct

Notification of Professional Support Services (letter) provided to parent. Date 9/10/09
Tier 2: Intervention Support Plan

Person responsible for supporting interventionist **Reading Coach**

Identify what/how supports will be provided **Weekly consultation on materials used and progress of student.**

Review Outcome of Tier 2 Intervention(s)

Collaborative Problem Solving Team (CPST) Meeting Date: **12/15/09**

☑ Provide a graphic representation of Tier 2 effectiveness by comparing baseline data to current data and the Tier 2 goal (Graphed data attached)

☑ Tier 2 intervention(s) were successful: fade to Tier 1 and continue graphic progress monitoring.

☐ Tier 2 intervention(s) were not successful; check one of the following:
  - Interventions not implemented as designed (content, frequency, etc.).
    **Next Step:** Implement Tier 2 intervention as designed.*
  - Student did not attend sufficient number of intervention sessions.
    **Next Step:** Continue to implement Tier 2 intervention. Consider intervention plan to increase attendance in or exposure to the intervention.
  - Intervention is not successful for a majority of the students receiving this intervention.
    **Next Step:** Teacher and case manager conduct additional assessment/diagnostics and consider alternative/modified Tier 2 intervention.*
  - Intervention is successful for the majority of students receiving the intervention, but not for this student.
    **Next Step:** Teacher and CPST consider alternative/modified Tier 2 intervention* or student is referred to CPST for additional diagnosis and to consider possible Tier 3 intervention. Decision: ☐ alternative Tier 2 ☐ Tier 3

☑ Parent Conference to review graphic representation of student progress toward the Tier 2 goal and to discuss recommended future action. Date: **12/15/09**

*Note: If considering an alternative or modified Tier 2 intervention or refined implementation, attach additional Tier 2 pages. Also consider the need for Speech/Language screening.

Tier 3: Implementation of Intensive Academic Intervention(s)

CPST Meeting Date

Tier 3 Intervention
Intervention Record Attachment

*Note:* Jackson is making adequate progress with this Tier 2 intervention, but he has yet to achieve benchmark. The intervention will not be faded at this time; rather, it will continue as currently implemented until benchmark level has been achieved. Progress toward benchmark will be formally re-assessed in the first week in February.
Jackson's Score
Peer Group
Benchmark (Aim Line)

Percent Correct Nonsense Word List

Baseline
Tier 2 Interventions (initiated on 09/14/09)

Tier 1 Universal Interventions


Aim
Peers
Jackson

9/20/09
10/4/09
10/18/09
11/1/09
11/15/09
11/29/09