



Procedures for Addressing Academic and/or Behavior Difficulties

1. Teachers with concerns for a student experiencing academic and/or behavior difficulties should contact the parent to advise them of the child's difficulties and seek their support. The teacher will provide written communication to the parent via the assignment book or other means with suggestions on what to work on at home. The teacher will maintain that communication for review by RTI Team.
2. The teacher will contact parent to advise them that child will be referred to Response to Intervention Team for review and send a referral (see pages 1-6) to the RTI coordinator.
3. The RTI Coordinator will schedule the RTI meeting to develop an intervention plan. Parents will be invited to attend with notification by letter or email of the scheduled date and time. Parents will also be given a written description of the RTI process or referred to the district website.
4. The RTI Team will develop an Intervention Plan and include the manner in which parents will receive feedback on student progress. The RTI team will meet on a regular basis to review and revise the plan. The meeting schedule will be developed by the RTI coordinator.
5. The RTI Team shall consist of the following members
 - Referring Staff Member
 - RTI Coordinator who collects data and presents assigned student
 - Principal/assistant principal
 - Child Study Team member
 - Support staff as deemed appropriate, such as school nurse, reading specialist, guidance counselor, basic skills or ESL Teacher, special education teacher, speech therapist, etc.

In order to use time efficiently, RTI Team, meetings have specific time limits for each step of the process. The process is as follows:

- *Presentation of the case by the Case Coordinator, including prioritization of concerns (3-4 minutes)*
 - *Development of an objective based on current status (2-3 minutes)*
 - *Brainstorming of solutions (6-8 minutes)*
 - *Refinement of all the suggestions (6-7 minutes)*
 - *Selection of solutions/recommendations (6-8 minutes)*
 - *Development of the Action Plan (5-7 minutes)*
 - *Determination of the evaluative criteria (2-3 minutes)*
6. Each person responsible for an intervention or accommodation shall initiate interventions addressing the child's difficulties and complete the **Intervention Form** (page 6).
 7. The interventions will be reviewed by the RTI team within 8 weeks or sooner. A referral to the Child Study team should be initiated by the RTI Team when determined necessary. However, any staff member may refer a student.
 8. Records of RTI intervention shall be maintained in the student record.

Name of Student _____

Date _____



**Response to Intervention Team
Referral Form**

Date: _____ Date of Birth: _____

Student's Name: _____ Gender: F M Age/Grade: _____

Date of Student Enrollment: _____ Ethnic Category: AI/A AP B H W

Teacher: _____ School: _____

Signature of Teacher _____

List 2-3 strengths/abilities of the student:

What specifically do you want the student to be able to do that he/she cannot do presently?

Academic Concerns

- ___ problems communicating written language
- ___ problems in oral communication
- ___ weak study skills
- ___ dependent worker
- ___ failure in one or more subject areas
- ___ drop in grades, lower achievement
- ___ needs directions given individually
- ___ lacks desire to do well in school
- ___ has trouble organizing belongings
- ___ does not complete homework
- ___ does not ask for help when needed
- ___ short attention span, easily distracted
- ___ gives up easily
- ___ poor short-term memory (e.g., can't remember one day to the next)
- ___ has demonstrated ability, but does not apply self
- ___ does not complete in-class assignments


Background Information

- ___ Attendance concerns
- ___ Attach attendance record
- ___ Known medical problem
- ___ Takes medication
- ___ 504 Plan
- ___ Changes in family dynamics
- ___ Basic Skills Instruction
- ___ private tutoring
- ___ speech therapy
- ___ private tutoring ESL Instruction
- ___ Previous private formal testing (attach)
- ___ Prior CST involvement

Comments

Baseline Data						
<input type="radio"/> Sight Word Identification Level _____ <input type="radio"/> Guided Reading Level _____						
<input type="radio"/> Phonics Assessment (Mark areas of weakness): _____ Letter Names _____ Consonant Blends _____ Letter Sounds _____ Blending Sounds _____ Short Vowels _____ Vowel Digraphs _____ Digraphs _____ Decoding Longer Words _____ Long Vowels _____ Other:				<input type="radio"/> Terra Nova R: _____ L: _____ M: _____ <input type="radio"/> InView _____ <input type="radio"/> NJASK LAL Score: _____ Math Score: _____		
<input type="radio"/> Curriculum Based assessments Per Unit	Date	Score	Date	Score	Date	Score
<input type="radio"/> Literacy Baseline						
<input type="radio"/> Fresh reads						
<input type="radio"/> Unit tests						
<input type="radio"/> Benchmark tests						
<input type="radio"/> End of Book Test						
<input type="radio"/> Writing Rubrics						
<input type="radio"/> Curriculum Based Assessment MATH						
<input type="radio"/> Topic tests						
<input type="radio"/> Benchmarks tests _____						

Comments: _____

 Tier I: Instructional accommodations by the general education teacher that do not impact grading		
1. Presentation Supplements: (Mark all that have been in place for an extended time)		
<input type="radio"/> Directions read to the student	<input type="radio"/> Student rereads to paraphrase	<input type="radio"/> Highlight key verbs in section for test directions
<input type="radio"/> Highlight or circle the task to be completed	<input type="radio"/> Use color-coding to emphasize steps to be followed	<input type="radio"/> Allow student to read aloud/ record and listen back
<input type="radio"/> Use tape recorded articles/books	<input type="radio"/> Provide headphones/earplugs to minimize noise	<input type="radio"/> Reduce the number of items/problems on a page
<input type="radio"/> Offer examples/model of the standard of work expected	<input type="radio"/> Provide visual supports to supplement auditory lessons (e.g., graphic organizers, tables/charts)	<input type="radio"/> Use frames, windows, or boxes to separate and space problems and/or text
<input type="radio"/> Divide a page into sections focusing on one section/line	<input type="radio"/> Use a vertical arrangement of multiple choices	<input type="radio"/> Enlarge print/font size
<input type="radio"/> Reduce copying from the board by providing photocopy pages that are well organized and easy to read	<input type="radio"/> Highlight, italicize, or bold major points in student copy	<input type="radio"/> Provide a copy of diagrams/ tables needed for tasks
<input type="radio"/> Use graphic representations to illustrate written directions or text	<input type="radio"/> Provide a copy of presentation notes with blanks in place of words to guide listening and allow students to complete blanks during instruction	<input type="radio"/> Reteach identified skill deficits:
<input type="radio"/> Allow student a tracker to follow text <input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Accommodations for Student Responses:		
<input type="radio"/> Reduce paper/pencil tasks	<input type="radio"/> Allow verbal responses that are tracked through anecdotal records	<input type="radio"/> Allow student to mark responses in the answer booklet instead of a separate sheet
<input type="radio"/> Use graph paper for placement of numerals/ to keep rows and columns straight	<input type="radio"/> Use alternatives to show mastery (e.g., demonstration, visual display)	<input type="radio"/> Give tests orally and record student responses
3. Setting/ Environment Time/Scheduling:		
<input type="radio"/> Preferential seating close to instruction/ free of high traffic/ distractions	<input type="radio"/> Reduce clutter/ disruptive stimuli	<input type="radio"/> Allow student movement time
<input type="radio"/> Conduct testing in small group	<input type="radio"/> Organizational aids and assistance	<input type="radio"/> Use multiple reminders
<input type="radio"/> adjust length of task/assignment	<input type="radio"/> Allow additional testing time	<input type="radio"/> Visual Schedule

4. Behavior-Based Data

Disruptive Behavior

- fighting
- defiance, violation of rules
- blaming, denying, not accepting responsibility
- cheating
- sudden outbursts of anger, verbally abusive to others
- noisy, boisterous at inappropriate times
- obscene language, gestures
- crying for no apparent reason
- erratic behavior
- general changes in behavior patterns
- other:


Motor Activity

- fidgets excessively
- has difficulty staying seated
- highly active, agitated
- restless, always on the go
- far less active than peers
- lack of impulse control
- works very slowly
- other

Social Skills

- tends to stay to self, withdrawn
- lack of peer relationships
- lacks control in unstructured situations
- appears lonely
- slow in making friends
- disturbs other students
- negative leader
- unyielding or stubborn on positions
- aggressive interaction with teacher
- difficulty in relating to others
- regularly seeks to be center of attention
- aggressive interaction with students
- angered by constructive criticism
- teases other students
- disrespects or defies authority
- demonstrates lack of self-confidence
- frequent ridicule from classmates
- appears unhappy/sad
- other:**

Describe accommodations, frequency, and student response to accommodations. Attach documentation of accommodations

 Tier II: Current interventions		
<input type="radio"/> Reading Specialist <input type="radio"/> #of sessions <input type="radio"/> Date/ times	<input type="radio"/> BSIP <input type="radio"/> #of sessions <input type="radio"/> Date/ times	<input type="radio"/> Peer Tutoring <input type="radio"/> # of sessions <input type="radio"/> Dates/times
<input type="radio"/> Counselor <input type="radio"/> #of sessions <input type="radio"/> Date/ times	<input type="radio"/> Speech Therapy <input type="radio"/> #of sessions <input type="radio"/> Date/ times	<input type="radio"/> Behavior Plan <input type="radio"/> Start date
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Parent notified of RTI Team referral:

Date: _____

Staff Member: _____

Name of Student _____

Date _____

Health Information

Summary of Health and Medical Information:

Frequency of Visitations to Nurse _____

Medications _____

Results of Screenings

Vision	_____	Date	_____
Hearing	_____	Date	_____
Other	_____	Date	_____

Recommendations for further medical assessment:

School Nurse Signature

Date

Name of Student _____

Date _____



**Response to Intervention
Meeting Notes**

Name of Student: _____ DOB _____ Date of Meeting _____

School _____ Grade _____ Teacher _____

Signatures of Participants

Agenda:

Next Meeting Date:

Name of Student _____

Date _____



Response to Intervention Service Plan

Name of Student: _____ DOB _____ Date of Meeting _____

School _____ Grade _____ Teacher _____

Describe the objective or skill you expect the child to demonstrate/ Interventionist

1. _____ / _____
2. _____ / _____
3. _____ / _____
4. _____ / _____

Interventions/Frequency/Duration

Personnel Responsible

Interventions/Frequency/Duration	Personnel Responsible



RTI Documented Interventions

Name of Student: _____ Grade _____ Interventionist _____

Interventions/Accommodations implemented

Date	Teacher's Initials	Specific lesson objective	Intervention /accommodation	Response to Intervention for stated objective