

**IMPLEMENTATION OF RESPONSE TO INTERVENTION: A CASE STUDY IN A
TEXAS EDUCATION AGENCY DESIGNATED OTHER CENTRAL CITY
SUBURBAN SCHOOL DISTRICT**

A Dissertation

by

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Submitted to the Office of Graduate and Professional Studies of
Texas A&M University
in partial fulfillment of the requirements for the degree of

DOCTOR OF PHILOSOPHY

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August 2018

Major Subject: Educational Administration

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ABSTRACT

Response to Intervention (RtI) is a critical component in the instructional continuum in KG-12 public education due to legislation requiring schools to provide struggling learners with instructional interventions designed to remediate achievement deficits. The purpose of this study was to identify the perceptions of elementary and secondary teachers and counselors of the implementation of a multi-tiered problem-solving RtI model in a Texas school district. This study was a phenomenological case study, conducted as a replication study of previous research completed in 2010. Survey questions and open-ended responses were collected and analyzed to determine the perceptions of elementary and secondary teachers' and counselors' perceptions of RtI implementation in a district with a minimum of five years implementation. A comparison of the two districts revealed variance in district structures and implementation attributed to the size of district enrollment. Recommendations were discussed regarding the implementation of RtI and the interaction between Texas Dyslexia, Section 504, and special education identification and evaluation processes.

DEDICATION

My dissertation is dedicated to family who are no longer here to share this experience with me.

My father, Warren Lieberman.

My grandmothers, Beatrice Kraus and Lillian Lieberman.

May your memories continue to be a blessing.

ACKNOWLEDGEMENTS

I would like to thank my committee chair, Dr. Irby, and my committee members, Dr. Webb-Hasan, Dr. Smith, and Dr. Vannest for their guidance and support throughout the course of this research.

I would like to extend a special thank you to Aunt Judy. Without your support and belief in me, I never would have been able to begin down this road. Your belief in me means more than I can express.

I would like to thank George and my children Quinn, Ethan, Brenna, and Gabrielle for their understanding throughout the course of my classes and this research project. Your patience and understanding have allowed me to complete this work. I hope that I have made you proud.

I would like to thank my mother for her unwavering support. Thank you for instilling in me a desire and drive to achieve. I owe much of what I am today to your belief in me, and your desire for me to be happy.

CONTRIBUTORS AND FUNDING SOURCES

This work was supervised by a dissertation committee consisting of Professor Irby, and Professors Webb-Hassan and Smith of the Department of Educational Administration and Human Resource Development and Professor Vannest of the Department of Educational Psychology.

All other work conducted for the dissertation was completed by the student independently.

There are no outside funding contributions to acknowledge related to the research and compilation of this document.

NOMENCLATURE

B/CS	Bryan/College Station
HSUS	Humane Society of the United States
P	Pressure
T	Time
TVA	Tennessee Valley Authority
TxDOT	Texas Department of Transportation

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CHAPTER 1

INTRODUCTION

Academically disadvantaged students continue to struggle in public schools in the United States. Success in closing the achievement gap through meeting the needs of academically disadvantaged students has remained elusive. Consequently, the achievement gap between academically disadvantaged students and their peers remains a national and political discussion. In 2002, President George W. Bush signed the No Child Left Behind (NCLB) Act as the re-authorization of the Elementary and Secondary Education Act (ESEA) 2001. NCLB addressed the needs of struggling learners in an effort to close the identified achievement gap, and to promote learning environments where all students learn and attain academic success (NCLB, 2001; U.S. Department of Education (USDE), 2004). The hallmarks of the NCLB legislation include: increased accountability for learner outcomes, flexibility in spending requirements to better serve struggling learners, increased parent involvement, and emphasis on successful instructional methods (USDE; 2004). The ESEA was reauthorized for the eighth time in December 2015 when the federal government re-structured the NCLB re-authorization of the ESEA. The 2015 re-authorization is re-named the Every Student Succeeds Act (ESSA).

In 2004, the Individuals with Disabilities Education Improvement Act (IDEIA) legislation was re-authorized by the United States Congress and signed into law by President Bush (Fuchs & Fuchs, 2006; Hale, Kaufman, Naglieri, & Kavale, 2006; Klinger & Edwards, 2006). One of the changes in the IDEA 2004 is the data requirements to document eligibility of students with a specific learning disability (SLD). Congress cited several concerns regarding the identification of a SLD including: fiscal implications associated with the number of students

identified as having a SLD, the number of ethnic minority students identified as special education, the inability of practitioners to explain the difference between students identified as SLD and other low achieving students, and practice of allowing students to be unsuccessful before assistance can be provided (Fuchs & Fuchs, 2006; Grigorenko, 2009; Shinn, 2007; Stecker, Fuchs, & Fuchs, 2008). This change in federal expectations provided public school districts the impetus to develop a model of instruction and intervention that would provide the data required for special education eligibility.

The shift in the language of IDEA 2004 changes the identification of SLD from the presence of a gap between ability and achievement to a much more in depth analysis of cognitive processes. Current evaluation practices recognize exclusionary factors that could negatively impact educational progress. In the presence of these exclusionary factors, evaluation staff is required to discount the impact of the exclusionary factors to justify the presence of a disability. A component of this documentation would include documentation of a lack of educational benefit after the provision of supplemental evidence-based instruction (Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Hale, Kaufman, Naglieri, & Kavale, 2006; Klinger & Edwards, 2006; Mastropieri & Scruggs, 2005; Reschly, 2005). IDEA embraced the spirit of a President's Commission Report (2001) that recommended special education should increase focus on learner outcomes and less on the special education process itself, utilize a prevention model and not a "wait to fail" model, and recognition that students with disabilities are general education students first. As a response to the legislative requirements of NCLB, ESSA, and IDEA, some school districts developed Student Assistance Teams (SAT) and implemented a Response to Education (RtI) process through the SAT on each campus.

Campuses are responsible for the identification of struggling learners and the development of individually designed interventions to address academic and behavioral needs through the SAT processes. Based on identified learner needs and student data, students are placed within a tiered intervention system. Each tier increases the intensity of interventions provided. Students who continue to not make progress, academically and/or behaviorally, may be referred to special education for further evaluation (Barnett, Daly III, Jones, & Lentz Jr, 2004; Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Glover & DiPenna, 2007; Hoover, 2011). The utilization of RtI had been identified as prevention designed to reduce academic and behavioral failures, and may be the mechanism for improving the outcomes for struggling learners (Barnett, Daly III, Jones, & Lentz Jr, 2004; Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Glover & DiPenna, 2007; Hoover, 2011).

Statement of the Problem

RtI is a three or four-tiered framework of targeted, research-based interventions to address specific learner needs of struggling students (Barnett, Daly III, Jones, & Lentz Jr, 2004; Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Glover & DiPenna, 2007; Hoover, 2011). This multi-tiered process includes numerous decision-making points regarding the students involved in interventions. The decisions are made by the SAT which is typically comprised of a campus administrator, counselor, and general education teacher. Decisions are based on student data reviewed periodically during the RtI process (Fuchs & Fuchs, 2006; Hoover, 2011).

In 2010, a survey of school administrators revealed that 61% were implementing some form of a RtI model (Mitchell, 2011), although confusion regarding the purpose and structure of the RtI process remain (Barnett, Daly III, Jones, & Lentz Jr, 2004; Berkeley, Bender, Peaster, &

Saunders, 2009; Fuchs & Fuchs, 2006; Hoover, 2011; Mastropieri & Scruggs, 2005; Shinn, 2007). Further, RtI implementation includes the changing roles of instructional staff, personnel responsibilities, program funding, and a re-evaluation of the historic separation between special and general education (Fuchs, Fuchs, & Stecker, 2010; Werts, Lambert, & Carpeter, 2009). While RtI has been implemented, there is limited research of the perceptions of school staff regarding perceptions of the RtI implementation process.

Purpose and Significance of the Study

RtI has become a critical component in the instructional continuum with the increasing need to provide struggling learners with interventions in an effort to close or reduce the achievement of struggling learners from their peers. Interventions are required by federal and state statutes to be provided to students who are struggling academically and/or behaviorally prior to the consideration of a referral for special education evaluation. Struggling students may access the RtI process for remediation to increase performance on state-wide assessments. The implementation of the RtI process may be the difference between success and failure for many students. The purpose of my study is to describe the perceptions of school staff of the implementation of an RtI program in an other central suburban Texas school district which has implemented RtI strategies within a three-tiered student assistance team (SAT) framework for 5 years or more.

Information from campus-based staff may provide insight to central office administration regarding improvement of the RtI processes, leading to improved learner outcomes. School staff implementing RtI in other districts may benefit from the information provided by this study. Further, information of staff perceptions may allow for the improvement of professional

development plans to provide on-going support and assistance to districts regarding the fidelity of the implementation of an RtI process.

Definition of Terms

Response to Intervention (RtI)

Response to Intervention (Rt) is a multi-tiered service delivery system in which schools provide layered interventions that begin in general education and increase in intensity depending on students' response (Fletcher & Vaughn, 2009).

Curriculum Based Assessment (CBA)

CBA's are short, frequent evaluations that are aligned to the curriculum. These evaluations are easily administered utilized by the classroom teacher. The data are utilized to adjust instruction to increase student mastery and performance (Fletcher & Vaughn, 2009; McAllenney & McCabe, 2012).

Problem Solving Model

The Problem Solving Model is composed of systematic, collaborative teaming process that emphasizing classroom interventions, goal setting, decision-making, and functional evaluation procedures in an effort to support struggling students and improve student achievement (Hollenbeck, 2007).

Progress Monitoring

Progress monitoring is a systemic approach to frequently administered assessments to determine whether students are progressing through the curriculum and are likely to meet long-term goals. The data from these assessments provide teachers with the level of student performance and rate of progression and progress through the curriculum (Stecker, Fuchs, & Fuchs, 2008).

Multi-Tiered System of Support (MTSS)

MTSS is a process of systematically documenting the performance of students as evidence of the need for additional services after making changes in classroom instruction. MTSS promises to change the way schools support students with learning and behavior problems by systematically delivering a range of interventions based on demonstrated levels of need.

Positive Behavior Interventions and Supports (PBIS)

PBIS is a MTSS based on a problem-solving model and aims to prevent inappropriate behavior through teaching and reinforcing appropriate behaviors (OSEP Technical Assistance Center on Positive Behavioral Interventions & Supports, 2007).

Standard Treatment Protocol

A standard treatment protocol is a process that approaches all students with a standard set of interventions and instructional opportunities (Fuchs & Fuchs, 2006; VanDerHeyden A. M., 2011; VanDerHayden, Witt, & Gilbertson, 2006).

Dynamic Assessments

Dynamic assessments are individualized and customized interventions and data gathering programs (Fuchs & Fuchs, 2006; VanDerHeyden, 2011; VanDerHayden, Witt, & Gilbertson, 2006).

Universal Lesson Design

Universal lesson design is a scientifically valid framework for guiding educational practice, including: flexibility in presentation, reducing barriers to instruction. This framework allows all levels of students to access instruction and to increase all students' achievement by scaffolding assignments, expected student output, and levels of mastery within the scope of the curriculum (Basham, et al., 2010).

Social Emotional Learning (SEL)

Social and emotional learning is the process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make reasonable decisions (CASEL, 2018).

Theoretical Framework

Lilly (2010) described K-8 teachers' and counselors' perceptions of the implementation of the Response to Intervention (RtI) process in a major suburban Texas school district which has implemented RtI strategies within a three-tiered problem-solving team (PST) framework for 2 or more years. My replication study was a direct replication of the research procedures utilized by Lilly. This research is strongly influenced by federal and state statutes regarding the implementation of an intervention system within the LEA to address the needs of struggling learners. Specifically, I identified and analyzed the organizational, academic, and behavioral interventions found within an implemented RtI process.

While there is general consensus in the field of what constitutes RtI, there remain significant differences in approach and philosophies. Researchers have documented agreement of a tiered structure of increasingly intense instruction and interventions provided to students who do not make progress or demonstrate educational benefit (e.g., Barnett, Daly III, Jones, & Lentz Jr, 2004; Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Glover & DiPenna, 2007; Hoover, 2011). In some models there are three levels of interventions prior to a special education assessment, resulting in what is effectively a four tier model. In others, the third tier is special education with only two general education tiers prior to referral and

identification as a student with a disability (Fuchs & Fuchs, 2006; Hoover, 2011; Mastropieri & Scruggs, 2005; Reschly, 2005).

Researchers (i.e., Fuchs & Fuchs, 2006; VanDerHeyden, 2011; VanDerHayden, Witt, & Gilbertson, 2006) have indicated consensus regarding the need for incremental data gathering opportunities. Throughout the RtI process, there are many decision-making points regarding the students involved in interventions. Quantitative and qualitative data are utilized by a designated team of education professionals to make determinations regarding student needs (Fuchs & Fuchs, 2006; Hoover, 2011).

Evaluation of academic data has been addressed through the research in two dominant schools of thought. The primary argument in the literature is between the use of dynamic assessments or a standard treatment protocol (Fuchs & Fuchs, 2006; VanDerHeyden, 2011; VanDerHayden, Witt, & Gilbertson, 2006). The argument is one of philosophical approach. The dynamic assessments allows for an individualized and customized intervention and data gathering program. Standard treatment approach approaches all students with a standard set of interventions and instructional opportunities, which is an easier system and process to manage.

In response to the concerns regarding over-identification of students with a SLD, the IDEA 2004 encouraged states to determine a more effective model for the identification of a SLD. The shift in the language of IDEA 2004 requires public schools to show that the student is not receiving educational benefit from interventions provided prior to a referral to special education can be considered (Fuchs & Fuchs, 2006; Shinn, 2007; VanDerHayden, Witt, & Gilbertson, 2006). The requirement to demonstrate a lack of educational benefit has required many states to develop and implement some form of a Response to Intervention (RtI) model (Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Hale, Kaufman, Naglieri,

& Kavale, 2006; Klinger & Edwards, 2006; Mastropieri & Scruggs, 2005; Reschly, 2005). RtI theorizes that the response of struggling students after being provided effective interventions can effectively be utilized in making additional data-based decisions regarding academic programming and supports or providing the evidence required to consider special education services (Fuchs & Fuchs, 2006; VanDerHayden, Witt, & Gilbertson, 2006). The purpose of RtI is to integrate resources to reduce the risk to students of receiving long-term negative consequences associated with poor academic progress and behavioral struggles.

The National Dissemination Center for Children with Disabilities (NICHCY, an acronym derived from its original name, National Information Center for Handicapped Children and Youth) is sponsored by the U.S. Department of Education to operate as a centralized resource for information on special education and children with disabilities ages birth through 21. NICHCY, along with the National Center on Response to Intervention define the RtI process (National Center on Response to Intervention, 2010; NICHCY, 2012). Specific characteristics of an RtI system include:

- A school-wide, multi-level instructional and behavioral system for preventing school failure;
- Universal screening;
- Progress monitoring; and
- Data-based decision making for instruction, movement within the multi-level system, and disability identification.

The multi-level system consists of three tiers of increasingly intense and individualized interventions in a problem-solving model. A school-based team considers student performance data to identify learning problems. The strengths of problem solving models include a way to

organize and evaluate student data. Possible weaknesses in the problem-solving model, is the variance present between various groups of educators. The more student data utilized for decision-making, the more likely the group will identify the learning difficulties of a student (RtI Action Network, 2014).

- Tier 1: students identified through a screening process are determined to be at-risk for failure. Students in Tier 1 receive research-based instruction as part of a class group, or through small group instruction. Adequate time is allotted to determine if the student is responding to the provided intervention. Student progress is monitored closely. If the student responds to the intervention provided, then this indicates that academic difficulties were caused by less appropriate or insufficiently targeted instruction. This is applied to behavioral progress as well. Typical time in Tier 1 is 6 weeks (RtI Action Network, 2014, para 3).
- Tier 2: students not responding to the first level of interventions move to the second tiered level of intervention. Tier 2 interventions are more targeted and intense interventions that are implemented for a longer period of time. The intensity of the interventions are adjusted depending on the student's response to the interventions provided. Lengthening instructional time, frequency of instructional sessions, adjusting the level of instruction, or reducing instructional group size are all ways that the interventions may be individualized (RtI Action Network, 2014, para 4).
- Tier 3: for students continuing to struggle after the provision of more targeted interventions, Tier 3 provides the most individualized instructional and behavioral interventions within the general education program (RtI Action Network, 2014, para 5).

The three tier problem-solving model is the model of RtI utilized in my research study.

Designing Schoolwide Systems for Student Success

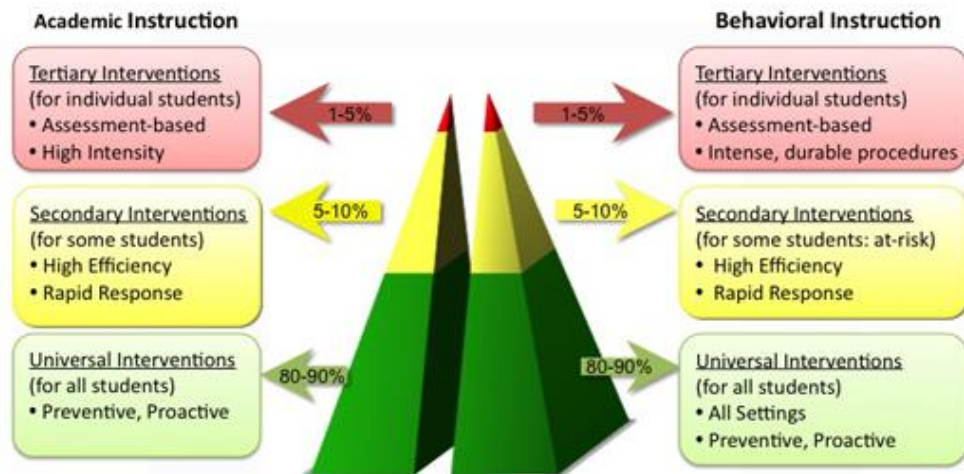


Figure 1. Example model of a three-tiered problem-solving model of RtI by the US Department of Education Office of Special Education Programs

Public schools are complex organizations (Meyer, 2005; Rowan, 1982; Ware, 1994).

Each organization has a contextual framework in which processes and educational systems are implemented. Schwandt and Marquardt (2000) identified the context of a system as the pattern maintenance function described as the acts of maintaining the general system's patterns or actions. The organization is designed to perpetuate and continue the constructs that are embedded within the system, in much the same way that inertia acts upon objects in motion in Newton's first law of motion. To change the direction of an object in motion, another force must act upon the object to change its current trajectory. Changes within systems behave similarly. The constructs embedded in the organization can be changed, but another force is required to act upon it to compel a change (Bourdieu, 1986; Nash, 1990). Leadership has a direct correlation to the implementation of change within an organization, and it is the role of leadership to manage the change process (Battilana, Gilmartin, Metin, Pache, & Alexander, 2010; Mills, 2011).

District and campus administration are responsible for providing the necessary professional development, supports, and expectation to facilitate RtI implementation (Danielson, Doolittle, & Bradley, 2007).

Throughout the RtI process, there are many decision-making points regarding the students involved in interventions. The decisions are made by the SAT which is typically comprised of a campus administrator, counselor, and general education teacher. Decisions are based on student data reviewed periodically during the RtI process (Fuchs & Fuchs, 2006; Hoover, 2011).

In 2010, a survey of school administrators revealed that 61% were implementing some form of a RtI model (Mitchell, 2011), although confusion regarding the purpose and structure of the RtI process remain (Barnett, Daly III, Jones, & Lenttz Jr, 2004; Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Hoover, 2011; Mastropieri & Scruggs, 2005; Shinn, 2007). Further, RtI implementation includes the changing roles of instructional staff, personnel responsibilities, program funding, and a re-evaluation of the historic separation between special and general education (Fuchs, Fuchs, & Stecker, 2010; Werts, Lambert, & Carpeter, 2009). While RtI has been implemented, there is limited research of the perceptions of school staff regarding perceptions of the RtI implementation process.

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implementation of the RtI process may be the difference between success and failure for many students. The purpose of my study is to describe the perceptions of school staff of the implementation of an RtI program in an urban Texas school district which has implemented RtI strategies within a three-tiered student assistance team (SAT) framework for 5 years or more.

Information from campus-based staff may provide insight to central office administration regarding improvement of the RtI processes, leading to improved learner outcomes. School staff implementing RtI in other districts may benefit from the information provided by this study. Further, information of staff perceptions may allow for the improvement of professional development plans to provide on-going support and assistance to districts regarding the fidelity of the implementation of an RtI process.

In her dissertation dated December 2010, Lilly reported that teachers and counselors cited several barriers to implementation of an RtI process. Findings in her study also indicated teachers' perceived lack of resources and knowledge as well as a lack of on-going support for implementing an intervention plan to ensure fidelity. Further, counselors indicated that a lack of time was a barrier to effectively implementing an RtI process. Three additional school years have passed since the Lilly study, but RtI implementation remains inconsistent across school districts and campuses. There is continued lack of consistency among the researchers in the field regarding the specifics in implementing an RtI process. Continued barriers continue to exist. My study is being conducted to determine if perceptions of teachers and counselors remain consistent with Lilly's findings, or if perceptions and implementation of RtI differ now.

Research Questions

Four research questions guided my study. They are as follows:

1. What are the perceptions of teachers regarding the Response to Intervention (RtI) process?
2. What are the perceptions of counselors regarding the implementation of the Response to Intervention (RtI) process?
3. What do teachers and counselors perceive as challenges to RtI implementation?
4. What recommendations do teachers and counselors perceive will improve the Response to Intervention (RtI) process?

Boundaries

As a participant observer during this research study, I was required to become directly involved as a participant in the lived experiences and daily lives of the participants of this research study (Jorgensen, 1989). To complete participant observations, the researcher is required to be an insider or a member of the organization being studied. My role as participant observer was overt and all study participants were aware of my role in the research and within the organization. The ethnographic approach to research allows the researcher to provide a narrative that reveals the truths through the researchers own experiences (Goodall, 2003). As such, this research is framed within the context of my own lived experiences, personal history, and my general world view. The data collected through research provides the researcher the ability to develop a narrative that is true in a specific context through the interpretation of a biased researcher.

CHAPTER II

REVIEW OF LITERATURE

An internet search was conducted using Google Scholar as a starting point for my review of literature. Several terms and/or phrases were utilized during the literature search. These terms and phrases included:

- Response to Intervention (RtI);
- RtI critique;
- Behavior RtI;
- RtI and English language learners;
- RtI and Special Education;
- RtI implementation;
- RtI fidelity;
- RtI models;
- RtI and teacher training: and
- RtI and professional development.

The reviewed articles were placed in general categories: (a) RtI basics, (b) RtI general education and special education, (c) RtI special populations, (d) RtI critiques, (e) fidelity of RtI implementation, and (f) RtI and policy.

Response to Intervention

Researchers have contributed further meaning to the IDEIA legislative requirements of the process required to address the needs of struggling learners prior to a referral and possible placement in special education (Artiles, Kozelski, Trent, Osher, & Ortiz, 2010; Berkeley,

Bender, Peaster, & Saunders, 2009; Flanagan & Alfonso, 2011; Hale, et al., 2010; Hoover, 2011; Mastropieri & Scruggs, 2005; Shinn, 2007). Shared descriptions of RtI include phrases such as: research based interventions, peer reviewed interventions, progress monitoring, systemic approach, tiered process, problem solving methodology.

In 2010, a survey of school administrators indicated that 61% of schools had implemented an RtI model, and were moving to expand it school-wide (Mitchell, 2011). RtI implementation has struggled to demonstrate consistency across RtI models regarding changing roles of staff, new requirements for teachers and assessment staff, and even the composition of required tiers in the intervention model (Mastropieri & Scruggs, 2005; Reschly, 2005). Additionally, the role of RtI as a way to address social and academic risks across a broad category of concerns increases discrepancies across RtI implementation models (Barnett, et al., 2006). Consensus is documented among practitioners that specific learning disability (SLD) identification consists of continued low achievement compared to peers despite the provision of adequate opportunities to learn and the absence of sensory impairments or other disabilities such as cognitive deficits (Hale, Kaufman, Naglieri, & Kavale, 2006; Reschly, 2005).

A significant change in the IDEA 2004 is the required methodology utilized to determine the presence of a SLD. Prior to 2004, schools utilized a straightforward IQ-achievement discrepancy model. However, there have been concerns regarding the number of children identified as students with a SLD; specifically consistent implementation of federal requirements, and the utilization of specified criteria in determining special education eligibilities (Shinn, 2007). Via longitudinal studies, researchers have confirmed that students are identified as eligible for special education services even though the specified criteria are not met (Shinn, 2007). In one study, nearly 40% of students in the research group did not meet eligibility criteria

utilizing the discrepancy model but had been determined eligible to receive special education services as a student with a SLD. Consensus is documented among practitioners that SLD identification consists of continued low achievement compared to peers despite the provision of adequate opportunities to learn and the absence of sensory impairments or other disabilities such as cognitive deficits (Hale, Kaufman, Naglieri, & Kavale, 2006; Reschly, 2005).

The 34 Code of Federal Regulations (CFR) §300.307 specifies that the State education agency (SEA) must not require the use of a severe discrepancy between intellectual ability and achievement for determining whether a child has a specific learning disability. The regulations further state a local education agency (LEA), or public school, may use a process based on the child's response to scientific, research-based intervention, and permit the use of other alternative research-based procedures for determining whether a child has a specific learning disability.

(Authority: 20 U.S.C. 1221e-3; 1401(30); 1414(b)(6))

Prior to the IDEA 2004 re-authorization, a SLD was identified through the documentation of a gap between student ability and academic achievement as measured through norm-referenced criteria assessments (Fuchs & Fuchs, 2006; Flanagan & Alfonso, 2011; Jale, et al.; Hoover, 2010; Shinn, 2007). Based on these measures, if the identified achievement level of a student was more than one standard deviation (standard deviation = 15 points) below the anticipated achievement level, then the student was determined eligible for special education as a student with a disability. Concerns regarding this evaluation methodology included fiscal implications, the sheer volume of students identified as having a SLD, the number of ethnic minority students identified as special education, the inability of practitioners to explain the difference between students identified as SLD and other low achieving students, and requiring students to be unsuccessful before assistance can be provided after identification of a disability

(Fuchs & Fuchs, 2006; Grigorenko, 2009; Shinn, 2007; Stecker, Fuchs, & Fuchs, 2008). Further, the norming of the assessment instrument themselves gave rise to concerns of the cultural and linguistic responsiveness of the evaluation process. Specifically, the utilization of evaluation instruments that are not normed to the population being assessed yields data that invalid for determining special education eligibility leading to the disproportionate representation of minority students receiving special education (Blatchley & Lau, 2010; NJCLD, 2010).

In response to the concerns regarding over-identification of students with a SLD, the IDEIA encouraged states to determine a more effective model for the identification of a SLD. The shift in the language of IDEIA requires not only an achievement gap to be identified for struggling students, but public schools also are required to show that the student is not receiving educational benefit from interventions provided prior to a referral to special education can be considered (Fuchs & Fuchs, 2006; Shinn, 2007; VanDerHayden, Witt, & Gilbertson, 2006). The requirement to demonstrate a lack of educational benefit has required many states to develop and implement some form of a Response to Intervention (RtI) model (Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Hale, Kaufman, Naglieri, & Kavale, 2006; Klinger & Edwards, 2006; Mastropieri & Scruggs, 2005; Reschly, 2005). RtI theorizes that the response of struggling students after being provided effective interventions can effectively be utilized in making additional data-based decisions regarding academic programming and supports or providing the evidence required to consider special education services (Fuchs & Fuchs, 2006; VanDerHayden, Witt, & Gilbertson, 2006).

Response to Intervention: Support in the Laws

The two most significant federal requirements that have shaped RtI in the public education system are the NCLB (2001) and the IDEA (2004). NCLB was the re-authorization of

the Elementary and Secondary Education Act (ESEA) of 1965. The hallmark of NCLB was the focus on closing achievement gaps between struggling students and their peers who were performing on grade level (U.S. Department of Education, 2004). Further, as specific population groups had historically struggled in academic achievement, the NCLB included increased accountability that focused on learner outcomes among at-risk populations. NCLB placed the responsibility for student success on the public school system. The education system became more focused on learner outcomes as a result of NCLB requirements and accountability. IDEA emphasizes the concept of all students receiving research-based, scientific instructional strategies and interventions. The general education program was now required to be more pro-active in interventions and support for struggling students than had been the practice with the stated goal of reducing the number of students referred and eligible for special education as children with learning disabilities. The IDEA clearly indicated that schools were to analyze outcome data and interventions in an effort to keep students out of special education. In 2015 the re-authorization of ESEA and NCLB culminated in the Every Student Succeeds Act (ESSA). ESSA maintained accountability requirements for accountability and funding. The primary variance in ESSA compared to the NCLB legislation is the increased focus on academic growth measurements as opposed to standard annual goals per grade of enrollment.

Prior to the IDEA (2004), two significant reports were released that bore significant influence on the legislation (Yell & Walker, 2010).

- *Rethinking Special Education for a New Century* (Finn, Rotherham, & Hokanson, 2001). A portion of the report, *Rethinking Learning Disabilities* (Lyon et al., 2001) discussed the shortfalls of the special education eligibility identification

processes in use at the time, with the recommendation that these practices be discontinued due to insufficiency in identification (Yell & Walker, 2010).

- *A New Era: Revitalizing Special Education for Children and Their Families* (President's Commission, 2001). The utilization of calculating a discrepancy was an invalid process, contributing to the misidentification of thousands of children annually. The commission recommended early intervention for academic and behavioral problems. It was also recommended that schools move away from the “wait to fail” model to identify students eligible to receive special education services. The Commission reported that students in special education programs were often students who received poor instruction, and were not truly students with disabilities. The Commission report recommended the use of a RtI model (Yell & Walker, 2010).

The requirement of the public school system is to identify all students with disabilities within the geographical boundaries of the LEA. Further, the LEA is required to provide to student and families a free appropriate public education, at no cost to the family. IDEA included very specific language to ensure that students with disabilities are educated with non-disabled peers to the fullest extent possible and provided access to the general curriculum.

While the IDEA does not name RtI as a specific requirement, the language states that public schools “may permit the use of a process-based on the child’s response to scientific, researched-based intervention” to form a basis for eligibility for special education (34 CFR §300.307). In Texas, the Texas Education Agency (TEA) utilizes the Texas Administrative Codes (TAC) to provide Texas public school districts with guidance regarding the implementation of the federal statutes. The TAC is approved by the State Board of Education

(SBOE) and the Commissioner of Education. Title 19 of the TAC contains what is referred to as the Commissioner rules for education. The 19 TAC §89.1040 regulations outline the requirements of eligibility under special education as a student with a learning disability. Specifically, the regulations state that eligibility decisions cannot be solely based on academic struggles, but that a student does not make progress even when provided with scientific, research-based intervention or exhibits a pattern of strengths and weaknesses in performance.

Effective Implementation of the Response to Intervention Process

There is great potential for RtI to improve learner outcomes, and RtI has been widely accepted by SEAs and LEAs. In Texas, state and university resources have been dedicated to improve learner outcomes through the use of a multi-tiered educational process (Chard, 2012). Learner outcomes are directly correlated to the quality of instruction provided in the general education setting (Darling-Hamman, Wei, Andree, Richardson, & Orphanos, 2009; Sanders & Horn, 1998; Sanders & Rivers, 1996; Wenglinsky, 2000; Westbury, 1993). Substantial changes in classroom teachers' perceptions of teaching and student learning are difficult to make and maintain (Desimone, Porter, Garet, Yoon, & Birman, 2002; Demings, 1998; Senge, et al., 2000; Supovitz, 2006). All organizations are products of the ways the members think and behave (Senge, et al., 2000). The ability of an organization to learn and adapt is critical to the long-term performance and success (Argote & Miron-Spektor, 2009). Learning takes place in multiple levels of an organization (Argote & Miron-Spektor, 2009; Schwandt & Marquardt, 2000; Senge, et al., 2000). However, meaningful systemic changes to an organization are a function of leadership (Bourdieu, 1989; Chizmar, 1994; Demings, 1998; Deshler & Cornett, 2012; Freire, 2006; Hallett, 2003; Senge, et al., 2000).

RtI is a school-wide problem solving model that designs instruction to meet unique learner needs (Berkeley, Bender, Peaster, & Saunders, 2009; Deshler & Cornett, 2012; Fuchs & Fuchs, 2006).

School-wide RtI functions on three basic core assumptions:

1. Teacher instruction is the most powerful indicator of student success;
2. All students can learn; and
3. Schools are required to provide all students educational benefit, which begins with preventing failure (Deshler & Cornett, 2012, p. 248).

All instructional decisions should be based on student data and responsive to learner needs.

Through this model of instruction based on student needs, the number of students inappropriately identified as eligible for special education due to cultural or linguistic factors will be reduced (Deshler & Cornett, 2012).

At the most basic level, RtI is an activity system that is embedded within the context of specified roles and functions, procedural knowledge, fidelity of implementation, and the local contexts. This system of RtI is immersed in both general and special education systems within the public school setting (Kozelski & Huber, 2010). Further, the RtI process requires multiple participants, reviews of data, and data-based decisions over time with high quality instruction as the foundational structure that comprises the tiered RtI intervention model (Deshler & Cornett, 2012; VanDerHeyden, 2011; VanDerHayden, Witt, & Gilbertson, 2006). Successful RtI systems require fidelity in implementation of a series of sequenced events and decision points within the process (VanDerHayden, Witt, & Gilbertson, 2006).

RtI models are typically divided into three tiers of interventions that are based on the identified needs and academic success of students involved in the tiers (Barnett, Daly III, Jones,

& Lentz Jr, 2004; Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Glover & DiPenna, 2007; Hoover, 2011). Although there may be variance in the number of tiers or levels in different RtI systems, the fundamental design of an RtI system includes identification of struggling students, data analysis, and increasing intensity of interventions along a continuum (Kupzyk, Edward, Ihlo, & Young, 2010).

Tier 1 is provided through core instruction, with the provision that 80% of students receiving the core instruction are successful. Fewer than 80% success rate indicates instructional issues (Hoover, 2011). Tier 2 provides supplemental services to students who are at-risk, continuing to struggle, or are not achieving at grade-level benchmarks (Fuchs & Fuchs, 2006; Hoover, 2011). The essential element of Tier 2 is that the supplemental services do not replace the Tier 1 instructional activities. Tier 3 differs in some models. In some models Tier 3 is special education, while in others it is an intense intervention prior to referral for special education evaluation (Hoover, 2011; Mastropieri & Scruggs, 2005; Reschly, 2005). Tiers 1 and 2 should adequately meet the needs of 95% of students enrolled in the core curriculum. Tier 3 should be providing intense and individualized interventions to no more than 5% of the student population (Hoover, 2011; Reschly, 2005).

Student behavior also is a significant predictor of student success in the public school setting (Reschly, 2005). RtI initially developed as an academic service, however through positive behavior intervention and support (PBIS) models; behavior has made a natural progression in the RtI process (Sulkowski, Wingfield, Jones, & Coulter, 2011). School-wide PBIS systems are natural extensions of the principles of RtI and are frequently seen as two sides to one coin. PBIS provides a structured framework to implement increasingly intense behavioral interventions

based on student progress data. The process for behavioral interventions mirrors the academic process.

Several conclusions can be drawn from the research. First, high quality instruction is the basic structure that comprises the tiered RtI intervention model. Second, for RtI to be of benefit to educational decision-making, all educators must engage in a systemic paradigm shift. Previous practices have viewed and implemented RtI as a required procedure to attain a referral to special education (Deshler & Cornett, 2012; Hoover, 2010; Klingner & Bianci, 2006). RtI needs to become viewed as genuine educational change, and not a new package for previous education practices. RtI, in other words, needs to become viewed as the process in and of itself, and not as a pre-referral process for special education (Hoover, 2010). RtI shifts some instructional supports back into the general education classroom, supports that have previously been viewed the realm of special education (Deshler & Cornett, 2012; Fletcher & Vaughn, 2009; Klinger & Edwards, 2006; Hoover, 2011; Kupzyk, Edward, Ihlo, & Young, 2010). Third, appropriate procedures to screen, progress monitor, and evaluate student progress must be implemented. Fourth, a well-defined Student Assistance Team with specified roles and expectations should be implemented.

RtI: Progress Monitoring

Monitoring student progress varies by school district, and may vary across campuses. Progress monitoring allows for the evaluation of student progress and achievement in the general education curriculum. Progress monitoring is a system of brief, frequently given assessments termed probes. These probes are to determine student progress through the curriculum (Stecker, Fuchs, & Fuchs, 2008). This process is identified as curriculum-based measurement (CBM) (Deno, 1985; McAlenney & McCabe, 2012; McMaster, Parker, & Jung, 2012; Shinn, 2007; Stecker, Fuchs, & Fuchs, 2008). Examples of a CBM are the Dynamic Indicators of Basic Early

Literacy Skills (DIBELS), Oral Reading Fluency (ORF), Oral and Written Language Scales (OWLS), Nonsense Word Fluency (NWF), Letter Naming Fluency (LNF), and the Texas English Language Proficiency Assessment System (TELPAS). CBMs are designed to measure academic progress toward specific skills and predict long-term student achievement based on rate of progress and mastery.

CBM has been an established practice in special education to monitor student progress toward mastery of goals and objectives contained in students' individualized education programs (IEPs). General education, however, has adopted this practice to allow for frequent class-level and student level progress monitoring. The CBM process allows for teachers to monitor progress toward curricular objectives, and to make adjustments in instruction, curriculum, or methodology based on student data (McAlenney & McCabe, 2012; McMaster, Parker, & Jung, 2012).

In an RtI model, CBM can be utilized:

1. As a component of a universal screener;
2. Monitoring the progress of at-risk students to determine their responsiveness to instruction and the possible need for more intense interventions; and
3. Identify and evaluate the effects of individualized interventions for struggling students. (McMaster, Parker, & Jung, 2012, p. 203).

Utilizing CBM as a universal screening process has several advantages. The probes are easily and quickly administered and scored, it can be linked to CBM data utilized for on-going progress monitoring, and there is significant data to indicate the validity of the test results and the predictive nature of these results (McAlenney & McCabe, 2012; McMaster, Parker, & Jung, 2012). The standard tasks evaluated through CBM include oral reading, maze reading, sequencing words or letters, and mathematics (Deno, 2003).

Historically, CBM reliability has been reported in two types: reliability in one moment of time and reliability in longitudinal data analysis (Yeo, Kim, Branum-Martin, Wayman, & Espin, 2012). CBM data typically are graphed over time, allowing for the longitudinal analysis of student response to an intervention or instruction. Repeated findings of continued struggle even with the provision of interventions result in a referral for special education evaluation. Consequently, the reliability of CBM data analysis directly impacts the accuracy of special education referrals (Ardoin, Christ, Morena, Cormier, & Klingbeil, 2013). CBM data are analyzed along two decision rules (a) data point decision rule, and (b) trend line decision rules. Both decision rules require a goal line that depicts the desired rate of progress. Data point decisions are based on the location of data points compared to the goal line. Data points above the line are effective, while data points below the line are considered ineffective. Trend line decision-making requires the graphing of a trend line to compare to the goal line. The steepness of the line is meant to depict the student's rate of growth. The estimated rate of growth is compared to the goal line using similar rules for analysis as the data point decision-making model (Ardoin, Christ, Morena, Cormier, & Klingbeil, 2013).

Various computer programs have been developed to facilitate the implementation of CBM. These programs frequently include data analysis tools to plot the data points or trend lines for instructional analysis. The Accelerated Math (Renaissance Learning, 1998) contains both a universal benchmark screener as well as frequent CBM. Renaissance Learning (2004) also produces the STAR Early Literacy program that provides both benchmark and CBM data.

In Texas, the Texas Primary Reading Inventory (TPRI, 2009) has been the required CBM to monitor student progress in reading. TPRI is a reliable assessment tool that is able to provide a comprehensive picture of a student's reading and writing development. TPRI was developed to

monitor progress in the five domains of reading instruction required to qualify for the Reading First Program under NCLB. The TEA now has endorsed several other tests that Texas public schools may choose to utilize now that the Reading First grant funding is no longer available to offset the cost of TPRI implementation. The requirement for progress monitoring, however, has not changed.

Treatment Fidelity and Integrity

Treatment integrity is a required component of any successful intervention as it increases the likelihood that the intervention will be successful. Interventions that have been research-based and have been shown to work are not ensured to work when it is implemented. The most effective practices do not work if they are not implemented with integrity (VanDerHeyden & Harvey, 2012). Without treatment integrity it is not possible to determine if poor learner outcomes are due to the poor implementation of a potentially effective intervention, or an ineffectual intervention implemented with integrity. Teachers' depend upon informal monitoring of student progress, with a self-defined confidence level to define student responsiveness to instruction (Gerber, 2005). Further, Gerber (2005) states that surrounding organization of the school develops and maintains levels of resource allocation that directly impacts teachers' abilities to respond to individual learner differences. As a result of varying degrees of teacher tolerance of student progress and the availability of resources, the integrity of interventions may vary significantly across instruction staff, campuses, and school districts.

Problem-Solving Protocol, Standard Protocol, or Combined Protocol Approaches

There are two major approaches toward intervention: (a) standard treatment protocol or (b) problem solving protocol. A third approach has developed based on a combination of the previous two approaches. The majority of schools utilize a problem-solving approach to

intervention. However, the majority of educational researchers endorse the use of standard treatment protocol approach to intervention (Fuchs & Fuchs, 2006).

Standard-protocols are interventions that have already been validated by researchers as effective (Johnson, Mellard, Fuchs, & McKnight, 2006). Meaning, researchers were able to study the intervention in settings with proper experimental and control groups to verify that the interventions work. Standard protocols can be designed to promote learner acquisition of a new skill or to remediate specific weaknesses (Fuchs & Fuchs, 2006b; Johnson, Mellard, Fuchs, & McKnight, 2006). Standard treatment protocol uses small group instructional settings, focuses on mastery for the majority of students, minimizes transitions while maintaining a quick instructional pace, and includes self-regulation strategies to increase goal oriented behavior. Sometimes the tutoring involved scripted materials to make the treatment as standard as possible across a variety of instructional staff. Standard are prescriptive, and consist of research-validated interventions that have been demonstrated effective with the majority of students. If a student responds poorly to instruction that is shown to benefit the majority of students, the quality of instruction as a factor has been removed due to the standardized implementation model (Benner, Nelson, Sanders, & Ralston, 2012; Fuchs & Fuchs, 2006b; Marchand-Martella, Ruby, & Martella, 2007).

Training of staff in efficacious implementation is easier in at standard-protocol model (Stecker, Fuchs, & Fuchs, 2008). A standard set of instructional practices can be established and benefit all students, including struggling students. Standardized practices allow for ease of administrative oversight, and remove the question of instructional quality impacting learner outcomes. From a systemic perspective, standard-protocols reduce potential variance within the RtI system allowing a consistent school-wide practice to be established and implemented (Barnes

& Harlacher, 2008). However, a weakness of this approach is the rigidity of the intervention process. There is little flexibility allowed for individualized intervention plans. There are abundantly available scientifically based, peer reviewed intervention programs available. However, this may require as school district to invest a significant amount of fiscal resources. Further, an increase in instructional staff may be required to implement a standard protocol model due to sizes of small groups and intervention program recommendations.

A problem-solving model designs individualized interventions to address specific learner needs (Fuchs & Fuchs, 2006b; Johnson, Mellard, Fuchs, & McKnight, 2006). Most schools have some type of problem-solving process established through a team such as a student assistance team (SAT), student study team (SST), or student instructional team (SIT) (Fuchs & Fuchs, 2006; Fuchs & Fuchs, 2006; Johnson, Mellard, Fuchs, & McKnight, 2006). The role of the problem-solving team is to develop a plan to modify and accommodate in the general education setting to support a struggling student while also looking to increase positive benefit for all students in the classroom (Johnson, Mellard, Fuchs, & McKnight, 2006). The struggling student is provided a research-based intervention that is specifically designed for the individual student (Lindstrom & Sayeski, 2013). Problem-solving teams meet to identify and analyze struggling students. The team assists the teacher to select, implement, and monitor the effectiveness of an intervention. The team reconvenes periodically to review new data, progress, student responsiveness to interventions, and to make adjustments in the plan as the data warrants (Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Kupzyk, Edward, Ihlo, & Young, 2010).

The individualized and fluid response provided to students through a problem-solving model increases the variance embedded within the RtI model. It is not as easy to distinguish if

continued poor learner response is due to instruction or the provided intervention. The development, implementation, monitoring, and reviewing all of these individual plans will result in a significant impact on teacher time. An individualized response model is time consuming and requires a significant time commitment.

A recommendation of researchers is to implement a combined protocol approach to RtI. Fuchs and Fuchs (2006) recommended that standard treatment protocols are utilized with academic concerns while a problem-solving approach is utilized to address behavioral concerns. Other researchers have also recommended a hybrid or combined protocol approach (Barnes & Harlacher, 2008; Crockett, Billingsley, & Boscardin, 2012; Deshler & Cornett, 2012). Disagreement continues among researchers, leaving schools without one recognized RtI implementation model to replicate (Satter & Dunn, 2012). SEAs and LEAs have been left to determine the model of RtI to be implemented. In Texas, the state has left the RtI model development and implementation to the district (Berkeley, Bender, Gregg, Saunders, & Saunders, 2009).

RtI: Team Approach

The majority of schools have implemented a problem-solving team to support struggling students and to improve learner outcomes (Johnson, Mellard, Fuchs, & McKnight, 2006). Schools use a variety of names for the problem-solving team. Members of the teams may include a combination of teachers, counselors, administrators, school health staff, content specialists, or other staff pertinent to the process. Additionally, parents also are members of the problem-solving team in many districts.

Problem solving teams (PSTs) may have a variety of names, but share a common purpose to provide interventions to struggling learners in an effort to improve learner outcomes. The

diverse nature of the PST is to allow for diverse knowledge and expertise to improve practice and result in improved learner outcomes. The collaborative intervention design process to provide the highest quality and informed interventions. This data-based decision-making process was embraced in the school setting by teachers who desired to understand and accelerate student progress and achievement (VanDerHeyden & Harvey, 2012).

The role of instructional staff has been impacted with the implementation of RtI. Campus and district level support staff have been required to support teachers in data analysis, intervention development and implementation, data collection, and to consult with instructional staff. Administrative staff now is required to monitor the implementation of the RtI process on the campus, and to closely monitor the quality of instruction within the general education setting (Johnson, Mellard, Fuchs, & McKnight, 2006). The role of counselors, general education teachers, and special education instructional and support staff has shifted. The provision of interventions in the general education classroom has shifted the provision of accommodations and modifications to general education teachers to support students in the RtI process. Counselors are now required to take a more active role in the treatment and prevention of academic struggles (Johnson, Mellard, Fuchs, & McKnight, 2006). Further, the involvement of parents in the PST has shifted perceptions of the role of parents within the school setting. Parents are active members of the PST, and the staff members must recognize the validity of knowledge the parents bring to the process (VanDerHeyden & Harvey, 2012).

Teaming in schools is not a new concept. The use of a team-centered approach to address the needs of struggling students sprang from concerns about the large number of students inappropriately identified as eligible for special education in the 1970's and 1980's (Nellis, 2012). These efforts were centralized around increasing the capacity of general education

teachers to meet the curricular, instructional, and behavioral challenges of struggling students. Within a problem-solving model, the continued utilization of the PST remains essential to schools to meet the increasing accountability, student outcomes, and support of student learning.

Problem Solving Teams

The PST is the location within the RtI process for the collaborative effort of team members to analyze student data in an effort to improve learner outcomes. The function of the PST is to develop an intervention plan to provide remediation of skills while simultaneously supporting the student adequately for continued progress in the curriculum. Current RtI models are preventative in nature and no longer required for a student to fail prior to the provision of interventions (Berkeley, Bender, Gregg, Saunders, & Saunders, 2009).

The decision-making process is critical for the RtI process to function. Deno (2005) described a five step problem-solving model:

1. Identify the problem;
2. Define the problem;
3. Examine alternatives;
4. Apply the chosen solution; and
5. Look at the effects. (p. 25)

Within this model, data is collected and evaluated at each step along the process. Other process have been developed and described. Tilly's (2003) approach to problem-solving uses four steps: (a) define the problem, (b) develop a plan, (c) implement the plan, and (d) evaluate.

In the RtI process, Ball and Christ (2012) focused on four purposes of assessment within the RtI process. The model they espoused allows a focus on decision validity. Decision validity is explained as decision based on assessment results. The purpose of assessment within the RtI

process is: (a) problem identification, (b) problem analysis, (c) progress-monitoring, and (d) program evaluation.

A universal screening process is the most commonly utilized method of problem identification. Screeners are used to determine a student's level of performance at the time of the assessment. CBM given at specific intervals of the school year allow for continued screening of student progress in the curriculum. Analysis of data should systematically identify critical skills that may become targeted for intervention while ruling out mastered skills. Based on assessment data and the PST analysis process, students are placed within the appropriate tiers of intervention to receive the prescribed intervention program.

Continued assessment during the intervention process is utilized to determine the student's responsiveness to the intervention program allowing the PST to determine if interventions are working or if adjustments to the plan need to be made. Program evaluation occurs throughout the intervention process, but also as a summative at the end of the process. Summative program evaluation typically discusses the effectiveness of a specific intervention, the curriculum, or a specific program. The summative evaluation is more systemically focused than student specific.

Bahr and Kovalski (2006) discussed a different problem-solving model. The steps in their proposed model are: (a) a request for assistance from a teacher, poor universal screener results, or a review of behavior documentation, (b) set a performance goal, (c) identify and select an intervention, (d) support the intervention strategy in the classroom, (e) monitor student progress, and (f) evaluate intervention outcomes.

Data analysis is an ongoing process. There is no set criterion that identifies a student as academically or behaviorally at-risk within the RtI process. Percentile ranks, cut points on CBM

scores are examples of possible data that can be used to identify students within an intervention framework (Hughes & Dexter, 2011). Once a RtI system determines how students will be identified as at-risk, the establishment of criteria for a student to progress to Tiers 2 and 3 is established. Progress monitoring is implemented, and the defined criteria guide the decision-making process.

Culturally and Linguistically Responsive RtI

For a student to be determined eligible for special education as a student with a Specific Learning Disability (SLD) the school district to provide documentation of the provision targeted, scientific research-based interventions to address identified learner strengths and weaknesses (34 Code of Federal Regulations (CFR)§300.311(a)(7); US Department of Education Office of Special Programs (OSEP)). Concurrently, changes in evaluation practices support the federal changes in definition. In previous evaluation practices, the presence of a discrepancy of at least 16 point between overall intellectual abilities and student achievement was adequate to meet special education eligibility. Present evaluation practices have changed in response to the cross-battery approach introduced by Dawn Flanagan, Samuel Ortiz and Kevin McGrew in the late 1990's. Cross-battery assessment (XBA) refers to the process by which psychologists use information from multiple test batteries (i.e., various IQ tests) to help guide diagnostic decisions and to develop a more comprehensive portrait of an individual's cognitive abilities than can be ascertained through the use of single-battery assessments. Evaluators make systematic, valid and up-to-date interpretations of intelligence batteries and to augment them with other tests in a way that is consistent with the empirically supported Cattell–Horn–Carroll (CHC) theory of cognitive abilities. One can say that the XBA process is supported by the federal definition of a SLD.

Evaluators choose the assessment battery based on data provided by monitoring student progress after the provision of scientific research-based interventions.

While RtI is not simply a pre-referral process for special education, it is important to understand the overall concerns regarding special education identification. Two categories of eligibility are significantly based on professional judgment; SLD and emotional disability (ED). Currently, approximately 5.5 million students are receiving special education, roughly 10% of the total U.S. student population. SLD identification comprises 45% of the total special education population. The numbers of students identified as SLD indicate the over-identification of students in this category. The disproportionate representation of students as SLD prompted the changes in IDEA 2004, and evaluation practices. The belief was RtI could decrease the number of students referred to special education by having the needs of struggling students met in general education.

Enrollment in public schools has become more diverse as does the U.S. population. Of the more than 52 million students enrolled in public schools, over 45% are from underrepresented racial/ethnic groups. Disproportionate representation in special education of students with culturally or linguistically diverse backgrounds has been well documented within the United States for more than 30 years (Dunn, 1968; National research Council, 2002; Robinson, 2016). Patterns of overrepresentation in specific eligibility categories and racial/ethnic groups have been documented in the literature. While patterns vary from state to state, the 28th Annual report to Congress (2006) outlined the high correlation of specific groups such as African American and American Indian students in high-incidence eligibility categories (i.e. emotional disturbance, specific learning disability, intellectual disability, and speech/language impairment) (Robinson, 2016; Skiba, 2006). The implementation of a comprehensive RtI model may be able

to reduce the disproportionate representation of specific student groupings. Twenty-one percent of U.S. students come from households whose primary language is other than English (Thorius & Sullivan, 2013). English language learners (ELLs) consistently perform below English proficient peers at the national level. It has been a concern of educators that ELLs are disproportionately referred and identified special education due to language constraints and lack of teacher knowledge of the impact of language differences in education (Thorius & Sullivan, 2013). Students with cultural or language differences have been disproportionately represented in special education. RtI provides a mechanism to reduce the inappropriate referrals of English language learners students to special education due to differences and not disabilities (Artiles, Kozelski, Trent, Osher, & Ortiz, 2010; Barrera & Liu, 2010; Blatchley & Lau, 2010; Klingler & Edwards, 2006; Harris-Murri, King, & Rostenberg, 2006). Pre-referral interventions have been a concern for educators for more than thirty years. All models have struggled to ensure students referred to special education are students with disabilities and do not have another cause for their behavioral and academic difficulties (Garcia & Ortiz, 2006; Ortiz, et al., 2011; Thorius & Sullivan, 2013). The continued disproportionate representation of English language learners, students of color, and economically disadvantaged students in special education demonstrates the gaps between research, policy, and practice (Gerber, 2005; Levinson, Sutton, & Winstead, 2009; Thorius & Sullivan, 2013). When RtI is implemented with culturally and linguistically diverse students, the intervention process must ensure that students' socio-cultural, linguistic, racial/ethnic, and other relevant background characteristics are considered as reasons for student difficulties (Garcia & Ortiz, 2006).

RtI is based on the provision of scientific, research-based instruction that has shown to be successful. Researchers, however, have raised the question of cultural and linguistic validity of

these interventions. For interventions to be deemed successful with a specific population, research to validate the intervention must be normed with students from the same demographic group (Klinger & Edwards, 2006). With variation across states' and districts' implementation of RtI, data will fluctuate depending on the local and state decisions and requirements. However, specific eligibility categories of special education have been over-represented by specific student populations. African American students are over-represented in emotional disability, developmental delay, and intellectual disabilities (Finch, 2012). African American and Hispanic students are overly identified as students with specific learning disabilities. The majority of ELLs are referred for special education due to general low performance in academic achievement, specifically in reading related areas (Ortiz, et al., 2011).

Status of State RtI Implementation

Zirkel and Krohn (2008) conducted a survey of state laws of RtI implementation. Zirkel and Thomas (2010) conducted a more in depth analysis of state laws and guidelines regarding RtI implementation. In 2006, the IDEA (2004) regulations required each SEA to establish criteria for the identification of a SLD. Three options were outlined in the federal regulations: (a) severe discrepancy can be permitted or prohibited as determined by the state, (b) RtI must be permitted, and (c) other alternative research-based procedures may be permitted. These options are to be a component of a process based on the child's response to scientific, research-based intervention. Federal regulations did outline requirements for special education eligibility reports including the consideration of a continuous progress monitoring, the instructional strategies utilized, documentation that the child's parents were notified of: (a) the interventions being provided, (b) the strategies used to increase the child's rate of learning, and (c) the parents' right to request an evaluation (Zirkel & Krohn, 2008). Table 1 outlines the status of state regulations

regarding the implementation of IDEA (2004) regulations on October 12, 2006. At the time of the study publication, fewer than half of the states had finalized regulations regarding RtI.

Twenty-three states had proposed regulations regarding the provision of peer-reviewed, scientific interventions prior to a referral to special education evaluation. Four states had a mandatory model of RtI being developed. The remainder of the states were developing or had developed some kind of transition from the severe discrepancy model to one that utilizes intervention data.

Table 1

State Implementation of IDEA (2004) in 2006

State's Choice Regarding RtI and Other Options	Proposed Stage (n=23)	Finalized (n=24)
Mandatory: (6 states; 13%); require RtI and Prohibit SD	FL, IN	CO, WV ^a
Other variation		IA
Transitional: (4 states; 9%)		IA
Permit RtI and third alternative but prohibit SD		IL, ME ^d
Permit RtI and -only until 2010- SD		IL, ME ^d
No table of figures entries found.	LA	
Permissive (36 states; 78%); permit RtI and SD only	AZ, MN, MT, NE, NC, PA, RI, TX, WI	ID, MD, MO, ND, NM ^e , NV, OK, OR ^f , SD, VT, WA, WY
State's Choice Regarding RtI and Other Options	Proposed Stage (n=23)	Finalized (n=24)
SD and third alternative	AR, CA, CT, HI, KY, MA, MI, OH ^g , SC, VA, MS	AL, KS, NY ^h , TN
SD or combination of RtI-SD	MS	UT

SLD=specific learning disability; RtI=response to intervention; SD=severe discrepancy

^aPermits SD until June 30, 2009

^bProvides alternative of “pattern of strengths and weaknesses”

^cProvides for other information including SD-type data under “pattern of strengths and weaknesses”

^dRequires RtI under label of “prereferral” by 2010

^eRequires RtI in grades K-2 as of July 1, 2009

^fSubsumes SD under “patterns of strengths and weaknesses”

^gRequires the state education agency to approve third option

^hProvides for third alternative in the form of “patterns of strengths and weaknesses” and prohibits SD for grades K-4 in reading effective July 1, 2012

In a follow up comparison study published in 2010, twelve states had adopted RtI as the required approach for SLD identification. States with mandatory RtI include: Colorado, Connecticut, Louisiana, Rhode Island, West Virginia, Florida, Illinois, Georgia, Maine, Delaware, New Mexico, and New York. This was twice the number of states with mandatory RtI from the initial study. Surprisingly, the severe discrepancy model remained a viable option and is not prohibited in the majority of states. Specifically, Massachusetts, Mississippi, Utah, and Washington explicitly allow a combined approach of RtI and severe discrepancy (Zirkel & Thomas, 2010). At the time of this study, 43 states had laws and/or guidelines that addressed the core characteristics of RtI. Of these states, 24 states required high quality instruction either in regulations or guidelines, 19 require universal screening for academic and behavioral concerns, 31 required continuous progress monitoring, twenty-nine required an increasingly intense tiered intervention process, and 20 had requirements for fidelity measures.

Hauerwas, Brown, and Scott (2013) further investigated state-level guidance regarding the RtI process. Previous studies identified that since the publication of the federal requirements in 2006 that while states had increased guidance or increased regulations, the definition of identification of a SLD was not significantly clarified (Zirkel & Krohn, 2008; Zirkel & Thomas, 2010). Hauerwas, Brown, and Scott identified that RtI was addressed in regulations in all 50 states as of October 2011. At the time of their study, 17 states required some form of RtI for the identification of a SLD, but RtI was not an exclusive source of data for determining special education eligibility for a SLD (Hauerwas, Brown, & Scott, 2013). Table 2 outlines the findings included in the Hauerwas, et.al. study.

Table 2

Summary of State’s Regulations and Guidance Regarding RTI in SLD Criteria	
Criterion	States
Allow RTI	AL, AK, AZ, AR, CA, HI, IN, KS, KY, MD, MA, MI, MN, MO, MT, NE, NV, NH, NJ, NC, ND, OH, OK, OR, PA, SC, SD, TN, TX, UT, VT, VA, WA
Require RTI	CO, CT, DE, FL, IA, NM (K-3), NY (k-4), RI, WV, WI, WY
Require RTI Plus Cognitive Processing	GA, ID, ME
Require RTI Plus Pattern of Academic Strengths and Weaknesses	LA
Require RTI: May use severe discrepancy (SD) or patterns of strengths and weakness (SW) after RTI data collected	IL, MS
Prohibit severe discrepancy	CO, CT, DE, IN, IA, NY, RI, WV
Prohibit patterns of strengths and weakness	FL
Regulations That Provide Specifics Beyond Federal Language about SLD and the Use of RTI Guidance ^d	AL, AR, CO ^a , CT ^a , DE ^a , FL ^a , ID ^a , IL ^a , IN, IA ^a , GA ^a , LA ^a , MA ^b , ME ^a , MN, MS ^a , MT, NM, NY ^a , NC, NC, OK, OH ^b , OR, RI ^a , VT, WA, WV ^a , WI ^a , WY ^a
No Guidance	DE ^c , HI, NV, NJ, WY ^{e,g}
RTI Guidance: Multitier Framework	AL, AK, AR ^f , AZ, IN ^e , KS, LY, LA ^e , MA, MN, MS, MT, NE, ND, NH, OH, OK, SC, SD, TX, UT, VT, VA, WV ^e , WI ^e
RTI Guidance: Multitier Framework that Also Addresses Special Education Process and SLD RTI Guidance for SLD Identification	CO ^e , CA, CT ^e , FL ^e , GA ^e , ID ^e , IA ^e , MD, NM ^e , NY ^e , NC, PA, WA AZ, CO ^e , CT ^e , IL ^e , IN, KS, ME ^e , MI, MO, MT, ND, OR, RI ^e , SD, TN, UT

Note: RTI = Response to Intervention; SLD = specific learning disability
^a States that require RTI. ^b Regulations include required forms. ^cFor students in grades K-4 referred for reading disability. ^dStates are listed more than once if multiple guidance documents are available. ^eStates that require RTI as part of SLD. ^fAR also has SLD guidance that addresses comprehensive evaluation and dyslexia, but not RTI.
^gCommunication with Wyoming Department of Education indicated RTI guidance in draft.

The Hauerwas, Brown, and Scott (2011) found that five years after federal regulations were released regarding the use of RtI data in SLD identification, 23 states had not provided guidance to practitioners on how to utilize RtI data in SLD identification. The federal requirements leave the states responsible for establishing RtI criteria. However, federal guidance to the states remains limited in scope and nature. The U.S. Department of Education Office of Special Education Programs (OSEP) has established required components of an RtI program, including: a) high-quality, research-based interventions in general education, b) progress monitoring, c) screening for academic and behavior concerns, and d) a multitiered process (Zirkel, 2011c). Federal guidance, however, falls far short of specifically defining a comprehensive RtI process. Hauerwas, Brown, and Scott (2011) documented that the state-provided guidance and regulations are also not prescriptive in nature, but primarily remain broadly aligned with the federal guidance. As a result, school districts remain responsible for defining a comprehensive RtI program and processes independently (Hauerwas, Brown, & Scott, 2011).

In addition to limited guidance from the state-level education departments, Zirkel (2011a) raised concerns regarding legally defensible RtI practices regarding SLD identification. Zirkel cited confusion among professional educators, case law findings regarding fidelity and integrity of RtI implementation, and procedures surrounding the identification of children with a SLD. Responding to Zikler, Daves and Walker (2012) continued this discourse regarding the confusion surrounding RtI and the challenges that teachers and public school administrators face in implementing an RtI program.

Mellard, McKnight, and Woods (2009) studied the screening and progress-monitoring instruments and procedures in 41 local school settings. Schools were selected based on a set of

criteria. The schools were required to have an RtI process with a minimum of two tiers. The RtI process was to include elements of:

1. general education practices;
2. student assessment practices;
3. intervention model practice;
4. disability determination practices; and
5. student outcome data. (p. 188).

The schools selected for the study were described in the article as “affluent” (p. 189). Only 3 percent of the 41 schools had a high proportion of low-socioeconomic-status students. Racial and ethnic diversity varied across campuses. Forty-two percent of schools had less than 1% of ELLs, 39% had between 1 and 9%, 19% had more than 10% students identified ELLs. In depth interviews of principals, general educators, special educators, and school psychologists in five schools were conducted. Several themes were identified through interviews: (a) the need for a good recordkeeping system, (b) concerns regarding staff engagement with the process, and (c) implementing RtI is an on-going process; screening, progress monitoring, and instructional changes are the steps to reach the goal of student success. The researchers noted the variability in practice observed. One concern articulated by the researchers was that the confusion surrounding RtI may have educators abandon the effort of implementation. Positively, however, teachers who experienced data-based decision making through screening and progress monitoring greatly prefer it over non-data-based decision making.

Stahl, Keane, and Simic (2013) conducted a study to evaluate the pilot implementation of an RtI framework in the first grade classrooms of three urban elementary campuses. Stahl, et al. identifies three components of RtI: (a) multiple tiers of instruction, (b) evidence-based

instruction, and (c) systemic collaboration and coordination of school-wide resources (Stahl, Keane, & Simic, 2013). The purpose of the Stahl et al. study was to determine the effectiveness of the RtI process initiated by the special education department in a large urban school district. The district has more than 1,700 campuses across the district. All three schools involved in the study were school-wide Title I campuses with more than 90% of students receiving free or reduced lunch. Student demographics are representative of the district as a whole. Each of the school campuses were rated in the top 25% of schools in the city as a result of student achievement, parent and teacher evaluations. The study was mixed-method, quantitative data collection and analysis with prolonged engagement and observations (one school year). Triangulation from multiple data sources was used to increase trustworthiness.

Each campus had a 90 minute literacy block, and a 30 minute phonics block every day in Tier 1. Prior to RtI implementation, School A and School B did not have a formally agreed upon phonic or word study program, using instead a reading and writing workshop model. School B also used stories from basal readers. School C was a Reading First school that utilized a basal reading series and its word study program. School A had two teacher participants, School B had four participants, and School C had three participants. All teacher participants in the study have master's degrees in childhood education.

Tier 1 RtI focused on word recognition and knowledge regarding letter recognition and phonemic awareness. These are areas most likely to be used as indicators at this age student for possible reading disabilities. Tier 2 interventions at School B and School C was provided before school during extended day hours. School A provided the interventions during the academic day. Results of the study revealed that the first grade students in all three schools showed

statistically significant gains between progress monitoring periods. Fewer students on each campus were identified as at-risk.

Bean and Lillenstein (2012) conducted research in five schools to obtain information on facilitating the initial implementation of an RtI process. The quantitative study was to (a) obtain teachers' perception of RtI, (b) how their roles had changed, and (c) Identify skill sets essential for educators to be successful in an RtI framework. Questionnaires were sent to principals of five elementary schools that had implemented RtI for three or more years. Classroom observations and teacher interviews were also conducted. Seven essential skills and competencies were identified by the participants:

1. In depth knowledge of literacy development and instruction (p. 494)
2. Role of data in educational decision-making (p. 494)
3. Differentiation of instruction (p. 495)
4. Differentiated instruction (p. 495)
5. Collaboration (p. 495)
6. Commitment to lifelong learning (p. 497)
7. Leadership skills (p. 497)
8. Facility with technology. (p. 497)

Lilly (2010) conducted research in one major suburban Texas school district. The phenomenological case study was to describe K-8 teachers' and counselors' perceptions of the implementation of the RtI process in a major suburban Texas school district which had implemented RtI strategies within a three-tiered problem-solving team (PST) framework for 2 years or more. A purposeful sample of K-8 teachers (including general education teachers, special education teachers, and specialists) and counselors were selected as participants. Forty-

four elementary teachers, 24 secondary teachers, nine elementary counselors, and three secondary counselors responded to an open survey. A follow-up questionnaire was sent to the survey respondents.

The Response-to-Intervention School Readiness Survey (Wright, 2006) was divided into five themes: (a) Understand the Model, (b) Use Teams to Problem Solve, (c) Select the right interventions, (d) Monitor Student Progress, and (e) Graph Data for Visual Analysis. These themes were utilized for data analysis.

Elementary and secondary teachers and counselors reported favorably regarding their knowledge level of the RtI process. Teachers also reported that interventions were well matched to address learner struggles. Elementary and secondary teachers and counselors also reported that the problem-solving team (PST) process was effectively selecting interventions and following up on student progress. Overall, teachers reported they perceived RtI as having beneficial effect on student performance.

Identified barriers to RtI implementation from elementary teachers included lack of resources, lack of knowledge about the RtI process, time consuming, paperwork, and lack of meeting time. Secondary teachers' comments revealed lack of knowledge about RtI as the primary barrier to implementation. Elementary and secondary counselors revealed similar perceptions.

Training was cited as major concerns by all respondents in the study. Campuses require necessary training to implement RtI. Specifically, trainings on interventions to meet individual academic and behavioral needs were identified. Further, instructional staff members require district and campus level support to implement interventions with fidelity, and to assist at-risk

students. In Table 3, I shared RtI district studies that I found in the literature. Some are studies that are published in journals, while others are dissertation research studies.

Table 3

RtI District Studies

Study Author	Year	Participants	Purpose	Design/Major Findings
Bean and Lillenstein	2012	Principal questionnaires; teacher observations and interviews	Obtain information to facilitate the implementation of an initial RtI process	Quantitative: Seven skills/competencies were identified as necessary by participants on all five campuses
Lilly	2010	Elementary and secondary teacher and counselor surveys; follow up questionnaires; thematic analysis	Describe the perceptions of K-8 teachers and counselors of RtI implementation in a three-tiered system using problem solving teams for 2 or more years	Mixed method: Likert scale allowed for quantitative analysis of perceptions. Open ended survey questions provided more qualitative data to support thematic analysis.
Mellard, McKnight, Woods	2009	Principals, general education teachers, special education teachers, school psychologists in 5 campuses	Evaluate the screening and progress monitoring processes and tools for effectiveness	Quantitative: RtI implementation is a process; Teachers preferred data-based decision making.
Stahl, Keane, Semic	2012	Elementary first grade teachers	Examine impact of reading RtI for low income students	Mixed method: Interviews and assessment result data analysis. Formal provision of basal reading and phonics instruction resulted in statistically significant gains in student reading scores
Zirkel & Krohn (2008); Zirkel & Thomas (2010)	2008; 2009	State regulations and guidance provided on state websites.	A review of states regulations and guidance analyzed to determine states'	Qualitative: RtI requirements/implementation varies across states. Requirements for RtI.

The Role of Litigation, Hearings, and Rulings on RtI Practices

Due process hearings and court cases about RtI have focused on three areas of IDEA regulations: (a) child find, (b) evaluations, and (c) eligibility, specifically eligibility under the category of specific learning disability (Walker & Daves, 2010). The decisions of an independent hearing officer (IHO) and the lower courts impact at the state education agency (SEA) level. LEAs must be cognizant of these decisions even if they are not binding on the LEA because further decisions may be impacted by the precedent set in prior rulings. Walker and Daves (2010) and Zirkel (2012) discuss several cases that involved child find, evaluation, and eligibility determination. Each of these cases has impact on school district practices and policies regarding RtI, special education referral, Child Find responsibilities under IDEA, evaluation, and identification requirements. Themes identified throughout these court cases include that RtI cannot delay or deny the identification of a disability and access to special education. The cases are outlined in Table 3. Court rulings have not specified a timeline for an unreasonable response by the school district to a parental request for assessment, however, two of the cases identified 12 months *O.F. ex rel. N.S. v. Chester Upland Sch. Dist.* (2002) and 6 months *A.W. v. Jersey City Pub. Schs.* (2007) as unreasonable time for the district to respond. Further, the court did uphold the documented progress of a student receiving interventions as appropriate reasons for the district to choose not to evaluate a student for special education *Joshua Independent School District* (2011). Further, the ruling in *A.P. by Powers v. Woodstock Bd. Of Education* (2008) affirmed the requirement for an identified educational need for special education as a component of eligibility for special education. See Table 4 for the outline of the articles.

Table 4

Summary of Court Cases Regarding RtI and Special Education

Court Case	Year	Topic	Ruling
<i>O.F. ex rel. N.S. v. Chester Upland Sch. Dist.</i>	2002	Child Find	A delay of 12 months from the time a child's parents had been informed that the child was struggling and the district suspected a disability is not reasonable.
<i>J.S. et al. v. Attica Central Schools</i>	2007	Child Find, Evaluation	Decision-making process should not be delayed.
<i>A.W. v. Jersey City Pub. Schs.</i>	2007	Child Find	A delay of 6 months from the time a child's parents had been informed that the child was struggling and the district suspected a disability is not reasonable.
<i>Baltimore Public School System</i>	2007	Child Find	Interventions and strategies be implemented to meet the needs of students within the regular school program before referral for special education services. However, the LEA must ensure this does not delay or deny a student's access to special education services.
<i>Ashli and Gordon C. ex rel. Sidney C. v. State of Hawaii, Department of Education</i>	2007	Child Find	Although the student was entitled to IDEA services, the parents were not entitled to reimbursement of their expenses in unilaterally placing the student in a private school following the district's refusal to provide services. The district was not ordered to provide compensatory services to reverse the effects of that decision on the student's progress.
<i>Marshall Joint School District No. 2 v. C.D. by Brian and Traci D.</i>	2009	Child Find	Student performing on grade level with modifications does not release the LEA from Child Find requirements.
<i>El Paso Independent School District v. RICHARD R.</i>	2008	Child Find	RtI process was an obstacle to special education evaluation and identification. LEA should act upon parent referral immediately while continuing to provide interventions.

Table 4 (continued)

Summary of Court Cases Regarding RtI and Special Education

<i>Court Case</i>	<i>Year</i>	<i>Topic</i>	<i>Ruling</i>
<i>Joshua Independent School District</i>	2010	Child Find, Identification	Although the parents were dissatisfied with their child's progress, the district was not in violation of IDEA due to documented progress through RtI.

Barriers and Challenges to the RtI Process

The implementation of RtI within a problem solving model has challenges. School districts have encountered barriers in the implementation of the process. RtI processes require a significant shift in the roles of education staff (Johnson, Mellard, Fuchs, & McKnight, 2006). As school personnel acquire new responsibilities, there is uncertainty in how to perform these new roles (Bean & Lillenstein, 2012). Further, educational staff reported that they are not necessarily as knowledgeable about areas of education as they need to be in RtI processes. Behavioral RtI components are not well defined, and frequently are not receiving the progress monitoring as necessary (Barnett, et al., 2006; Benner, Nelson, Sanders, & Ralston, 2012).

Progress monitoring was inconsistently implemented across schools and districts (Ball & Christ, 2012; Bititci, Carrie, & McDevitt, 1997; Christ, Burns, & Ysseldyke, 2005). While it is a vital component to the RtI process, it remains an area of inconsistent implementation. This lack of progress monitoring consistency results in inconsistent RtI implementation and learner outcomes.

Resource allocation is an additional concern that impacts the implementation of RtI. Time was stated as a concern by teachers interviewed. Numbers of staff to provide interventions

also are a barrier to RtI implementation (Mellard, McKnight, & Woods, 2009). With current educational resources at a premium, school districts do not have extra funds to develop and implement an RtI process. Rather, a system that integrates the RtI model into the overall academic processes will allow schools to implement with the most efficiency and fidelity.

Cultural, racial, and linguistic differences remain barriers to effective intervention for some student populations (Artiles, Kozelski, Trent, Osher, & Ortiz, 2010; Blatchley & Lau, 2010; Finch, 2012; Klinger & Edwards, 2006). Concerns were raised about the cultural and linguistic responsiveness of intervention programs. Teachers' may not be knowledgeable about the needs of English language learners (ELLs) to meet their language needs in the general education classroom. Although barriers and challenges remain, research has shown that RtI within a problem-solving process has improved learner outcomes (Ardoin, Christ, Morena, Cormier, & Klingbeil, 2013; Bahr & Kovalski, 2006; Christ, Burns, & Ysseldyke, 2005; Fuchs & Fuchs, 2006; Fuchs & Fuchs, 2009; Kozelski & Huber, 2010).

CHAPTER III

METHOD

In this phenomenological case study, I replicated Lilly's (2010) study in a different school district and type. Unlike Lilly's original research, my role within the research was not an unbiased outside observer. Rather, my role was one of participant observer. The purpose was to describe K-8 teachers' and counselors' perceptions of the implementation of the Response to Intervention (RtI) process in a Texas Education Agency categorized, Other Central City Suburban Texas school district which has implemented RtI strategies within a three-tiered problem-solving team (PST) framework for 5 or more years. This chapter includes in details: (a) the research design, (b) description of the participants, (c) instrumentation, (d) data collection procedures, (e) data analysis, and (f) the researcher's biases.

Research Design

In keeping with the concept of a replication study, I replicated the design used by Lilly (2010). Replication studies combine results from prior research with results of a new study specifically designed to replicate and extend the results of prior studies (Bonett, 2012; Burman, Reed, & Alm, 2010). Replication studies have historically been underutilized if not absolutely discouraged across various branches of the social sciences (Burman, Reed, & Alm, 2010; Duvendack & Palmer-Jones, 2013; Francis, 2012; Freese, 2007; Hartshornwe & Schachner, 2012; Koole & Lakens, 2012; Schmidt, 2009). Journal publication of replication studies is one of the restrictions placed on researchers that discourages replication studies (Hartshornwe & Schachner, 2012; Schmidt, 2009). Direct replications are not routinely found in published literature, but researchers state this is more a result of the publications themselves rather than the

validity of the research. Conceptual replications, however, comprise the majority of publications in some fields of study. In conceptual research, the original procedure is varied to test a hypothesis in a different way (Carpenter, 2012; Schmidt, 2009). Replication studies can be comprised of direct replications or conceptual replications. Direct replications attempt to follow an original experiment's procedure with as much fidelity as possible. Replication of a procedure is defined as a direct replication (Schmidt, 2009). My study will be a direct replication of the methodological procedures. Additionally, since the Lilly study was a qualitative one, the additional information in another setting would be advantageous in terms of meta-synthesis of findings on RtI.

This research study was a replication study that directly replicated the survey and verbatim reporting of participant responses. A growing number of research voices are identifying not only the validity of replication studies, but the intrinsic value of conducting replication studies. Replication increases both transparency of the research process as well as increasing accountability among researchers (Duvendack & Palmer-Jones, 2013). A number of researchers in various fields have raised concerns that scientific research publishing practices are inhibiting replication studies (Carpenter, 2012; Koole & Lakens, 2012; Nosek & Bar-Anan, 2012). Recently, researchers (e.g. Carpenter, 2012; Pashler & Wagenmakers, 2012; Schmidt, 2009) have placed a focus on the beneficial impact of research replication to validate prior research. Adding validity to the reproduction of research studies, an online collaborative effort has been implemented to examine the rate and predictors of reproducibility in psychological studies. This voluntary effort has been named the Open Science Collaboration (Carpenter, 2012; Nosek & Bar-Anan, 2012; Pashler & Wagenmakers, 2012). Yin (2003) stressed that in replication logic for cases that each case has to be carefully selected by the researcher so that it either (a) predicts

similar results (a *literal* replication) or (b) predicts contrasting results but for predictable reasons (a *theoretical* replication). As a direct replication study, the research procedures was conducted as closely as possible to the original study conducted by Lilly (2010), thereby creating a literal replication with the same theories and the same methods. The context of the research, however, shifts the research into a district with demographic differences to the original research. By altering the demographics, I will expand the knowledge generated by the original study, while seeking to validate the previous findings generated by Lilly (2010).

In replicating Lilly's procedures, I utilized a phenomenological case study design to describe teacher and counselor perceptions of RtI implementation using a three-tiered model. Case study research is conducted across various situations. Case study research can contribute new knowledge of individual, group, organizational, social, political, and related phenomenon (Yin, 2009). Case study research is a fitting research design to study processes (Merriam, 1998). Case studies can provide insight into programs to enable the identification of situational attributes to allow for further understanding of the processes as they currently exist. Case studies allow for an in depth understanding of the group in the study, and the identification of existing social structures or systemic constraints through comparative case study analysis (Merriam, 1998). In this case study, I will follow Lilly's design in detailing teachers' and counselors' descriptions of the implementation of RtI in one Other Central City Suburban Texas school district and allowed their voices to describe the challenges of RtI and recommendations to improve RtI.

Phenomenology is a method of acquiring knowledge and meaning through a detailed examination of personal experiences (Smith, 2011). A phenomenological approach will be used because a phenomenological research design allows the researcher to explore the unique

understandings and perspectives of an individual's lived experiences (Cooney, Dowling, Murphy, & Sixsmith, 2012; Flyvbjerg, 2006; Smith, 2011).

Open-ended survey questions and a follow-up questionnaire, which were used and validated by Lilly (2010), will be used with permission to describe the experiences of teachers and counselors in an Other Central City Suburban Texas school district which has utilized RtI strategies to assist students for 5 years or more. Additionally, as Lilly did, so will I provide frequencies and percentages from her Likert scale survey to determine the knowledge about the RtI implementation by teachers and counselors.

Unlike Lilly, however, this research also incorporated the philosophical framework of interpretive ethnography. Phenomenological ethnography is defined the study utilizing various participant observation methodologies to understand the lived experiences and culture (Katz & Csordas, 2003). As a result, the interpretation of data to develop a holistic interpretation of the lived experiences of participants working within District X. Qualitative research utilizes multiple method, or triangulation, to secure a more in-depth and rich understanding of the phenomenon in questions (Denzin & Lincoln, 2008).

Research Questions

Abiding by the concept of a replication study, I used the same questions that Lilly used.

They are represented in questions 1 through 4:

1. What are the perceptions of elementary and secondary teachers regarding the Response to Intervention (RtI) process?
2. What are the perceptions of elementary and secondary counselors regarding the implementation of the Response to Intervention (RtI) process?

3. What do elementary and secondary teachers and counselors perceive as challenges to RtI implementation?
4. What recommendations do elementary and secondary teachers and counselors perceive will improve the Response to Intervention (RtI) process?

Context and Setting

An Other Central City Suburban Texas school district of 2,845 enrolled students was chosen for this research study. In order to ensure confidentiality for the participating school district, the district’s name is represented in this study with an alpha character pseudonym. District X has implemented RtI strategies within a Problem-Solving Team (PST) framework for more than 6 years and has trained teachers and counselors using the three-tiered PST model, which was the theoretical framework of this study. The ethnic make-up of District X compared to District A utilized by Lilly (2010) is reflected in Table 5. In Table 6, I compared teachers’ years of experience in the field between Districts A and X.

Table 5

Teachers by Ethnicity

District	African American	Hispanic	White	American Indian	Asian/Pac Islander	Asian	Pac. Islander	Two or more races
A	25.5%	26.0%	43.6%	0.2%	4.6%	n/a	n/a	n/a
X	0.5%	4.2%	93.7%	0.0%	n/a	1.0%	0.5%	0.0%

Data for District A from Texas Education Agency’s AEIS report as reported by Lilly (Lilly, 2010).

Data for District X from Texas Education Agency’s Academic Performance Report (TAPR) (TEA, 2013).

Table 6

Teachers by Years of Experience

District	Beginning Teacher	1-5 years experience	6-10 years experience	11-20 years experience	Over 20 years of experience	Overall Average
A	9.4%	38.3%	22.5%	17.1%	12.7%	9.2 years
X	2.6%	41.7%	20.9%	39.2%	15.5%	12.4 years

Data for District A from Texas Education Agency's AEIS report as reported by Lilly (Lilly, 2010).

Data for District X from Texas Education Agency's Academic Performance Report (TAPR) (TEA, 2013).

District X has five campuses, with a total of six counselors. Three of these counselors work with students in grades Kindergarten through eighth grade. Table 7 contains student population totals by ethnic and demographic percentages for District X. District A information for teacher, counselor, and other student data was obtained from the 2011-2012 Academic Excellence Indicator System (AEIS) report for the district and the district's administrative office as reported by Lilly (2010). District X information for teacher, counselor, and other student data was obtained by the 2012-2013 Texas Academic Performance Report (TAPR).

Table 7

Student Population by Ethnic/Demographic Distribution Percentages by District

District	Total Students	Af. Amer.	Hisp.	White	Nat. Amer.	Asian / Pac. Is.	Asian	Pac. Is.	Two or more races	Econ. Dis.	At-Risk
A	21,208	19.7%	72.6%	6.4%	0.1%	1.2%	n/a	n/a	n/a	78.1%	61.1%
X	2,845	1.3%	18.8%	76.8%	0.3%	n/a	0.4%	0.2%	2.2%	28.5%	27.2%

Data for District A from Texas Education Agency's AEIS report as reported by Lilly (Lilly, 2010).

Data for District X from Texas Education Agency's Academic Performance Report (TAPR) (TEA, 2013).

The context and setting of this study were altered due to the district chosen for the study.

The Texas Education Agency (TEA) classifies Texas public school districts into the following

nine categories: major urban, major suburban, other central city, other central city suburban, independent town, non-metropolitan: fast growing, non-metropolitan: stable, rural, and charter school districts (Texas Education Agency, 2014). District X has lower enrollment than District A. Further, District X is farther from a major urban setting than is District A. As a result, the student demographics differ between the two districts as demonstrated in Table 7.

District A utilized in Lilly's research (2010) is classified by the TEA as a major suburban school district. A district is classified as a major suburban district if it meets the following TEA-specified criteria: (a) it does not meet the criteria for classification as major urban; (b) it is contiguous to a major urban district; and (c) its enrollment is at least 3 percent that of the contiguous major urban district or at least 4,500 students. A district also is classified as major suburban if: (a) it does not meet the criteria for classification as major urban; (b) it is not contiguous to a major urban district; (c) it is located in the same county as a major urban district; and (d) its enrollment is at least 15% that of the nearest major urban district in the county or at least 4,500 students (Texas Education Agency, 2014).

District X is representative of the TEA classification of Other Central City Suburban. One hundred sixty five Texas school district have this classification. TEA defines other central city suburban if: (a) it does not meet the criteria for classification in any of the previous subcategories; (b) it is located in a county with a population of between 100,000 and 839,999; and (c) its enrollment is at least 15% of the largest district enrollment in the county. A district also is other central city suburban if: (a) it does not meet the criteria for classification in any of the previous subcategories; (b) it is contiguous to an other central city district; (c) its enrollment is greater than 3% that of the contiguous other central city district; and (d) its enrollment exceeds the median district enrollment of 817 students for the state (Texas Education Agency, 2014).

Participants

Purposeful sampling allows the researcher to select information-rich (Patton, 2005) cases which will provide a greater knowledge and understanding to address the purpose of the research. A purposeful sample of K-8 teachers (which include general education teachers, special education teachers, and specialists) and counselors who were employed in an Other Central City Suburban Texas school district were selected because (a) the district had implemented RtI strategies within a problem-solving team (PST) framework for five years or more, and (b) teachers and counselors were trained using a three-tiered model.

Elementary and Secondary Teachers

All elementary and middle school teachers in District A were eligible to participate in the study, but only the campuses in which the survey was forwarded to teachers by campus principals or counselors were included in this study. All District X elementary, intermediate, and junior high school campus teachers will be eligible to participate in the survey. Surveys were emailed to staff using the Qualtrics system. Teachers were provided a direct link to the survey through the Qualtrics generated email.

Elementary and Secondary Counselors

Two elementary counselors and 2 secondary counselors were requested to participate in this research study from 2 elementary schools and 2 middle school campuses. Four elementary and secondary campus counselors serving K-8 grades received the email survey and have the opportunity to participate. Surveys to counselors were also emailed directly to staff through the Qualtrics system. A direct link to the survey was provided through the Qualtrics generated email.

Instrument

To maintain integrity between my research and Lilly's 2010 replicated study, in this phenomenological case study, I used a survey design with (a) Likert scale questions and (b) open-ended questions. Results from the survey provided a numeric description of the group's beliefs, trends, attitudes, or opinions and allowed the researcher to generalize the results to the broader school personnel. In this case study, I used *The Response to Intervention School Readiness Survey* designed by Wright (2006) that was modified with author permission and utilized by Lydia Lilly (2010). I also received permission from Wright, as well as Lilly, to use the instrument. Modifications made by Dr. Lilly included open-ended and demographic questions to further describe the school's implementation of RtI and that captured the teachers' and counselors' perceptions of the implementation of RtI. *The Response –to-Intervention School Readiness Survey* (Wright, 2006) contained 26 questions divided into five themes aligned with the theoretical framework of this study which addressed school readiness for RtI: (a) *Understand the Model*, (b) *Use Teams to Problem-Solve*, (c) *Select the Right Intervention*, (d) *Monitor Student Progress*, and (e) *Graph Data for Visual Analysis* (Lilly, 2010). The Likert scale of the *Response-to-Intervention School Readiness Survey* was modified with permission from the author by Lilly (2010). Modifications allowed the participants to respond to four answer choices: (a) *Strongly Agree*, (b) *Agree*, (c) *Disagree*, and (d) *Strongly Disagree*. Part II of the survey contained four open-ended questions to obtain more in depth teacher and counselor responses and allowed the researcher to identify how teachers and counselors dealt with the RtI process (Lilly, 2010). The four open-ended questions asked of the participant on the survey were as follows:

1. What, if any, challenges have you faced while implementing RtI within the problem-solving team with your students and how have you overcome these challenges?
2. What recommendations do you believe will improve the RtI process on your campus to better assist struggling students academically and/or behaviorally?
3. Do you feel the RtI strategies have effectively assisted struggling students academically and/or behaviorally? If yes, in what way? If not, why not?
4. Do you have any additional comments or concerns about RtI that you would like to contribute that were not addressed in this survey?

Validity of the Instruments

Answers to a survey instrument are valuable only to the extent that it can demonstrate to have a relationship to the facts or individual states of interest (Fowler, 2009). Validity of an instrument refers to the degree that it measures the concepts they are intended to measure and if the research instrument can provide information to accurately describe characteristics of the respondents (Flynn, Schroeder, & Sakakibara, 1994; Fowler, 2009). According to Fowler (2009) validity for subjective measures cannot be directly observed, but inferred from other studies of how answers are related to other similar measures. The original *Response-to-Intervention School Readiness Survey* was validated for construct validity prior to the Lilly (2010) study, and through the use of the survey in the Lilly study. The answers provided were appropriately aligned with the phenomenon being studied.

Trustworthiness or Rigor of the Study

Trustworthiness or rigor was used in the research study to reduce any threats regarding the validity of the qualitative components and to ensure the quality and accuracy of findings (Guba,1981; Krefting,1990; Lincoln & Guba,1986). Four criteria of trustworthiness are

identified by Lincoln and Guba (1986): (a) credibility, (b) transferability, (c) dependability, and (d) conformability.

Credibility

Credibility refers to the internal validity of the study. Credibility is obtained from the uncovering of people's lived experiences as they are lived and perceived by participants (Guba, 1981; Krefting, 1990). Credibility was addressed in this research study by using the triangulation of multiple research methods as a strategy to add rigor, depth, complexity, and richness a research study. Triangulation is used to produce a more comprehensive and in-depth understanding of the phenomena being studies (Denzin & Lincoln, 2008).

Transferability

Transferability refers to the extent to which the findings of a study can be applied to other settings, contexts, or groups (Guba, 1981; Krefting, 1990; Lincoln & Guba, 1986); this information may be relevant in transferring the findings (Lilly's and mine) from one location to another with differing types of school districts. The results of this research may be generalizable to other central city suburban schools or districts with similar demographics and context. The results may not be generalizable to more urban or rural districts because this study was conducted in a Texas Education Agency (TEA) designated Other Central City Suburban Texas school district. However, the ethnographic frame of the data interpretation is more concerned with generatin knowledge and possible actions that may be taken within the specific context of this setting.

Dependability

Dependability considers whether the findings of the study would be produce consistent results if the study was replicated (Guba, 1981; Krefting, 1990; Lincoln & Guba, 1986). The data

collection and data analysis process were described in detail in the Lilly (2010) to allow other researchers to repeat the study using the same survey, open-ended questions, and follow-up questionnaire with teachers and counselors in other central city suburban districts. This research was a replication of the Lilly dissertation study set within the Other Central City Suburban Texas setting.

Confirmability

Confirmability of the research is the assurance of the researcher that the findings of the study are not the preferences or bias of the research, rather that the findings are based on the experiences and ideas of the respondents (Shenton, 2004). Several activities to ensure trustworthiness have been designed into the research study. Data was themed and cross-checked. Verbatim low-inference descriptors were utilized to further increase neutrality and objectivity. Member checks were developed into the research design. Further, triangulation of findings allowed for increased validity and provided evidence of neutrality and objectivity of the researcher's interpretation of data. Researcher biases were disclosed in using reflexivity methods described in the Research Bias section of this study.

Data Collection

The data collection methods used in this study began first by obtaining permission to replicate the research completed by Lilly (2010). Next, I obtained permission to perform research from the Superintendent of the school district selected for the study. Then, permission to conduct the replication study was obtained from the Institutional Review Board and Texas A&M University after dissertation committee approval. An electronic survey was constructed using Qualtrics and distributed through that system to all K-8 teachers and counselors in district X. In order to adhere to the ethical standards and guidelines of the University, the email included a

brief description of the study and the purpose. The email explained the importance of participating in the study, and provided informed consent information with assurances of confidentiality.

Elementary and Secondary Teacher Participants

A link to an online survey was sent to the four campus administrators serving students K-8. The email was sent through the Qualtrics system. Participation was voluntary. Researcher biases were examined and disclosed. All data from the teacher and counselor surveys were coded and stored on a secured computer that is password protected. All data will be destroyed after two years.

Elementary and Secondary Counselor Participants

An email was sent to the four campus counselors with a request to participate in the survey. The email was sent via the Qualtrics system. Counselor participation was voluntary. Researcher biases were examined and disclosed. All data from the teacher and counselor surveys were coded and stored on a secured computer that is password protected. All data will be destroyed after two years.

Researcher Bias

The analysis of data in a phenomenological study requires a researcher to interpret the participant's own experiences, the researcher must recognize and attempt to remove personal biases that may impact data analysis. However, the ethnographic influence within this research readily recognizes the biases and personal impact of the researcher on the data analysis and findings inherent within this study. I became the District X Director of Special Education in January 2013. In 2018 my role expanded to include student supports through Section 504, Dyslexia services, and health services. My role is to develop and support central office and

campus-based administrators to implement systems within District X. The Special Education Department previously has not interfaced with the RtI processes or systems within the district. However, an examination of special education referrals and the special education population demographics reveal a disproportionate representation of Hispanic and African American students. Further, English language acquisition remains a concern in early referrals to special education.

Throughout my career, I have seen the impact on students and families when children are inappropriately identified as students with a disability. The impact to the education of a student with a special education eligibility can have life-long repercussions. As a result, I embrace the philosophical belief behind RtI is to provide services through the general education program to support struggling learners resulting in fewer referrals to special education. However, this philosophy is a paradigm shift in both general and special educational practices. Consequently, a large amount of energy is invested in supporting the RtI process and helping teachers to trust the process, and often explaining why a special education referral will not result in an evaluation. I have very strong, personal beliefs in RtI as both a process and the resultant cultural beliefs of a true RtI campus. I have also been fortunate during my tenure as a Special Education Program Monitor for TEA to speak with educational leaders across the state, and to observe various programs state-wide. This has provided me with a more global and theoretical understanding of the role of RtI as part of a broader continuum of services offered district-wide.

Veracity of the Study

To increase the veracity of the study, I utilized several methods throughout this study. To the extent that objectivity within the research is not achieved the findings of the research are only true from the researcher's perspectives. Further, findings are only true within the specific context

of the research locations (Stewart, 1998). The access and immersion within the culture of study allow for more accurate perceptions and interpretations of data.

Prolonged fieldwork allows the researcher more time to develop a deeper contextual understanding of the local culture, histories, and players in the field (Stewart, 1989). It also allows the researcher to uncover more complex information due to the time of engagement within the field. Prolonged fieldwork allows for the patient process of learning within the research context. Alder and Alder (1987) identify several membership roles in research. Among these roles is that of a complete member of the research setting. Complete-member-researchers (CMRs) are fully immersed and integrated into the environment of study (Adler & Adler, 1987). Opportunistic researchers are already members of a setting prior to the implementation of the research. As Riemer (1977) explains, there are advantages to engage in research within a setting and context in which they are already engaged, and in which the research also has unique knowledge and expertise. Several advantages are inherent within this approach to research such as a) facilitates entry into the research setting, b) facilitates and assists in developing rapport with the study participants, and c) it allows for an accurate interpretation of findings. Some disadvantages of this strategy is that it is typically not possible to replicate the research due to the unique nature and situation of the researcher's role within the field of study.

Reflexive Practices

Reflexivity is the balance of the researcher's understanding that information is always interpreted through the self (DeLuc & Maddox, 2016). Engagement in qualitative research requires the researcher to understand that in the learning process there is a reciprocity of influences, both the researcher on the social context and the social context on the researcher (Palangas, Sanchez, Molintas, and Caricativo, 2017). Reflexivity in qualitative research allows

for the researcher to reflect on knowledge as it is learned, situate the knowledge within the theoretical perspective of the researcher. Reflexivity also recognizes that research is not a passive process but recognizes that the researcher is an active participant within the setting and context of the study itself (Palangas, Sanchez, Molintas, and Caricativo, 2017). Reflexivity is part of the process a researcher undergoes to understand and recognize the influence of our own experiences on the research itself.

Data Analysis

The Response-to-Intervention School Readiness Survey (Wright, 2006 modified by Lilly, 2010) was divided into three parts with five sections in Part I, which were aligned to the RtI three-tiered model theoretical framework. The five sections which describe teacher and counselor perceptions and understandings of the three-tiered RtI model were used as themes for the data: (a) *Understand the Model*, (b) *Use Teams to Problem-Solve*, (c) *Select the Right Intervention*, (d) *Monitor Student Progress*, and (e) *Graph Data for Visual Analysis*. The data from the 26 questions for each section of Part I of the survey will be sorted in Qualtrics and reported by these themes and listed in tables by elementary teachers, secondary teachers, and elementary/secondary counselors in percentages to answer research questions one and two. Tables are listed in Chapter IV.

Qualitative data analysis strategies were used to report the open-ended survey results and interview responses. In qualitative data analysis, the data was broken into manageable units, coded, and evaluating for themes and patterns (Lincoln & Guba, 1986). Part II of the survey contained four open-ended questions which allowed teachers and counselors to voice their response to the challenges of RtI implementation using the three-tiered model within a PST framework, state recommendations for improvement of the RtI process, express RtI

effectiveness, and voice additional concerns to answer research questions three and four.

Verbatim low-inference descriptors were used to report individual participants' responses for the open-ended survey questions and follow-up open ended questionnaires. Researcher peer review with colleagues and university experts was used to verify all results. Additionally, the researcher's reflections and voice were added to the reported data as a strategy for data analysis and reporting of the social construct studied in this research.

CHAPTER IV

FINDINGS

This chapter contains the findings of my phenomenological case study on the implementation of RtI in an Other Central City Suburban Texas school district. Due to state and federal legislative mandate to provide struggling learners with interventions in an effort to close or reduce the achievement of struggling learners from their peers has made RtI into a critical component of district curricula. Therefore, the purpose of my study is to describe the perceptions of school staff of the implementation of an RtI program in a Texas Education Agency designated other central city suburban Texas school district which has implemented RtI strategies within a three-tiered student assistance team (SAT) framework for 5 years or more.

A phenomenological case study approach was used to describe the self-reported teachers' and counselors' perceptions of the implementation of the RtI process in one other central city suburban Texas school district. Part I of the survey contained 26 Likert-scale questions. Part II of the survey contained four open-ended questions, and Part III contained five demographic questions. Thirty one general education teachers, 8 special education teachers, and 2 counselors accessed and responded to the survey through the Qualtrics program which requested a description of RtI implementation within a three-tiered student assistance team framework. The findings of this study answered the following four research questions:

1. What are the perceptions of elementary and secondary teachers regarding the Response to Intervention (RtI) process?
2. What are the perceptions of elementary and secondary counselors regarding the implementation of the Response to Intervention (RtI) process?

3. What do elementary and secondary teachers and counselors perceive as challenges to RtI implementation?
4. What recommendations do elementary and secondary teachers and counselors perceive will improve the Response to Intervention (RtI) process?

The findings from my phenomenological case study may contribute to the RtI knowledge base and benefit teachers and counselors in other districts who are implementing RtI to assist students with academic and behavioral challenges. Additionally, information obtained from these findings could provide critical information for improving the RtI process for other educators.

Demographic Information

To gain an understanding of the background of my research participants in my study a demographic profile was obtained. Demographic information from the survey questions for elementary and secondary teachers and elementary and secondary counselors are listed first in this section. A total of 71 participants accessed and initiated participation in the online survey. Of these 71, a total of 41 elementary and secondary teachers completed the survey and agreed to participate in the research.

Elementary/Secondary Teachers

Of the elementary and secondary teachers who participated in this survey 9.8% taught *Kindergarten-1*, 39.0% taught *grades 2-4*, 26.8% taught *grades 5-6*, and 19.5% taught *grades 7-8*. Of the elementary and secondary teachers who participated in this study, 81.6% were general education teachers, and 21.1% identified as special education teachers. Of the general education teachers were representative of the following grade levels of instruction: 1 teacher (3.2%) taught *grades Kindergarten-1*, 13 teachers (41.9%) taught *grades 2-4*, 9 teachers (29.0%) were teaching

grades 5-6, and 7 teachers (22.6%) taught grades 7-8. Special education teachers were dispersed across elementary and secondary campuses with 2 teachers (25%) teaching Kindergarten-1, 3 teachers (37.5%) grades 2-4, 1 teacher (12.5%) grades 5-6, and 1 teacher (12.5%) grades 7-8.

The largest content area represented by the participants of this study was *English language arts* with 34.2% of participants assigned to teach *English language arts* content classes. A large percentage of the teachers who responded to this survey identified as *elementary core content* teachers (31.7%), 26.8% taught *math*, 17.1% taught *science*, 17.1% taught *social studies*, 7.3% taught *electives/specials* classes, 9.8% taught *special education self-contained*, 4.9% of teachers responded they had *other* teaching responsibilities. At the time of this survey, district policy required all content area teachers to be certified to teach *English as a second language* and to ensure their *gifted and talented* endorsements to remain employed.

A large percentage (43.6%) of the elementary and secondary school teachers who responded to this survey had between *6-10 years* of teaching experience, 20.5% had *0-1 years* teaching experience, 20.5% had *2 -5 years* teaching experience, and 12.8% had *over 10 years* teaching experience. *English language arts* (24.3% elementary and 9.8% secondary) and *Math* (17.1% elementary and 9.8% secondary) were reported as the most subject area taught. Only 7.2% of respondents (4.8% elementary and 2.4% secondary) reported teaching special education self-contained classes. General education self-contained classroom assignment was reported by 2.4% of elementary respondents. The majority of teachers (60.9%) reported implementing RtI strategies for *5 or more years*, 24.4% of respondents have *fewer than 5 years'* experience implementing RtI strategies (90% elementary and 10% secondary of these respondents).

Research Question One

To answer Research Question One, “*What are the perceptions of elementary and secondary teachers regarding the implementation of the Response to Intervention (RtI) process?*” elementary and secondary teacher responses from Part I of the survey and the open-ended survey question, “*Do you feel RtI strategies have effectively assisted students struggling academically or behaviorally?*” were used.

Part I of the *Response-to-Intervention School Readiness Survey* (Wright, 2006) was divided into five themes: (a) Understand the Model, (b) Use Teams to Problem Solve, (c) Select the Right Interventions, (d) Monitor Student Progress, and (e) Graph Data for Visual Analysis. The RtI model has been defined as a multi-tiered service delivery system in which schools provide layered interventions that begin in general education and increase in intensity depending on students’ response (Fletcher & Vaughn, 2009). RtI models are typically divided into three tiers of interventions (Barnett, Daly III, Jones, & Lentz Jr, 2004; Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Glover & DiPenna, 2007; Hoover, 2011).

The National Dissemination Center for Children with Disabilities along with the National Center on Response to Intervention and the RtI Action Network) define the RtI process (National Center on Response to Intervention, 2010; NICHCY, 2012; RtI Action Network, 2014) describe the RtI model used as the framework for this study as: (a) Tier 1 support is provided in the general education classroom using quality differentiated instructional strategies and informal assessments; (b) Tier 2 interventions were designed to meet the needs of student who did not respond to the provided Tier 1 interventions designed by the problem-solving team with parental support; and (c) Tier 3 provides additional intensive interventions and includes an evaluation for special education determination. The results of Part I of the survey describe elementary and

secondary teachers’ understanding of the RtI process within this model. Those findings are listed in tables by the following themes: (a) Understand the Model, (b) Use Teams to Problem-Solve, (c) Select the Right Intervention, (d) Monitor Student Progress, and (e) Graph Data for Visual Analysis.

Understand the Model

The majority of elementary teachers chose *Strongly Agree* or *Agree* as responses to statements regarding their understanding of the RtI model for the theme *Understand the Model*. Elementary teachers: (a) strongly agreed their principal supported RtI (57.6%), (b) they agreed their school staff had an overview of RtI (48.5%), (c) they agreed their school staff understood the RtI model (45.5%), and (d) they strongly agreed that the levels or Tiers for student academic or behavioral improvement were defined (39.4%). Table 8 listed the overall findings in percentages.

Table 8

Understand the Model: Elementary Teacher’s Responses in Percentages (n=33)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
1. At my school the principal strongly supports Response to Intervention (RtI) as a model for identifying educational disabilities.	3.0	0.0	39.4	57.6
2. At my school the staff understands RtI and the purpose of research-based interventions.	3.0	24.2	48.5	21.2
3. At my school the majority of the staff (95% or more) understands the RtI model, believing that it may benefit teachers as well as students.	3.0	21.2	45.5	30.3
4. At my school there are three clearly defined Tiers of intervention that all staff understand.	6.1	30.3	39.4	24.2

The majority of secondary teachers chose *Strongly Agree* or *Agree* as responses to statements regarding their understanding of the RtI model for the theme *Understand the Model*. Secondary teachers: (a) strongly agreed their principal supported RtI (50.0%), (b) they agreed

their school staff had an overview of RtI (50.0%), (c) they agreed their school staff understood the RtI model (50.0%), and (d) they agreed that the levels or Tiers for student academic or behavioral improvement were defined (50.0%).

Table 9

Understand the Model: Secondary District A Compared to District X Teachers' Responses in Percentages (n=8)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
5. At my school the principal strongly supports Response to Intervention (RtI) as a model for identifying educational disabilities.	0.0	25.0	25.0	50.0
6. At my school the staff understands RtI and the purpose of research-based interventions.	0.0	25.0	50.0	25.0
7. At my school the majority of the staff (95 percent or more) understands the RtI model, believing that it may benefit teachers as well as students.	0.0	12.5	50.0	37.5
8. At my school there are three clearly defined Tiers of intervention that all staff understand.	0.0	37.5	50.0	12.5

Use Teams to Problem-Solve

The majority of elementary teachers selected *Agree* as their response choice for the theme *Use Teams to Problem-Solve*, overall findings are listed in percentages in Table 10. Elementary teachers agreed that their campus intervention teams: (a) were credible (54.5%), (b) followed a formal PST model during meetings (45.5%), (c) made teachers feel welcomed and supported (39.4%), (d) used background/baseline information (48.5%), (e) inventoried school-wide resources (39.4%), (f) used interventions that were scientifically-based (54.5%), (g) offered clear, objectives, and measurable goals for students (36.4%), (h) used various methods of assessments

(82.0%), (i) implemented intervention integrity (39.3%), and (j) followed-up through team meetings with referring teacher (36.4%). The findings are summarized in Table 10.

Table 10

Use Teams to Problem-Solve: Elementary Teachers' Responses in Percentages (n=33)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
1. The RtI team on my campus has members with a high degree of credibility among other staff members.	0.0	3.0	54.5	42.4
2. My school's intervention team follows a formal problem-solving process.	3.0	21.2	45.5	30.3
3. My school's intervention team creates an atmosphere in which the referring teacher feels welcome.	3.0	18.2	39.4	39.4
4. My school's Intervention Team collects background information/baseline data on the student to be used at the initial Intervention Team meeting.	6.0	15.2	48.5	30.3
5. My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency, speech, and defiant behavior.	6.0	39.4	39.4	15.2
6. The RtI team selects academic and behavioral interventions that are scientifically based.	6.0	15.2	54.5	24.4
7. The RtI team sets clear, objective, and measurable goals for student progress.	6.0	30.3	36.4	27.3
8. My school can use local or research norms (e.g. CBM) or criterion-based benchmarks (e.g. DIBELS) to judge the magnitude of the student's delay in basic academic skills.	0.0	3.0	82.0	15.2
9. My school's Intervention Team documents the quality of the referring teacher's efforts in implementing intervention ('intervention integrity').	9.0	21.2	39.3	24.2
10. My school's Intervention Team holds follow-up meetings with the referring teacher to review student progress and judge whether the intervention was effective.	3.0	24.2	36.4	36.4

The majority of secondary teachers chose *Agree* for the theme *Use Teams to Problem-Solve* as shown in Table 11 in percentages. Secondary teachers agreed that their schools' intervention teams: (a) were credible (50.0%), (b) followed a formal PST model during meetings (62.5%), (c) made teachers feel welcomed and supported (75.0%), (d) used background/baseline information (87.5%), (e) inventoried school-wide resources (50.0%), (f) used interventions that were scientifically-based (75.0%), (g) offered clear, objective, and measurable goals for students (37.5%), (h) used various methods of assessments (87.5%), (i) implemented intervention integrity (50.0%), and (j) followed-up through team meetings with referring teacher (62.5%).

Table 11

Use Teams to Problem-Solve: Secondary Teachers' Responses in Percentages (n=8)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
1. The RtI team on my campus has members with a high degree of credibility among other staff members.	0.0	25.0	50.0	25.0
2. My school's intervention team follows a formal problem-solving process.	0.0	25.0	62.5	0.0
3. My school's intervention team creates an atmosphere in which the referring teacher feels welcome.	0.0	25.0	75.0	0.0
4. My school's Intervention Team collects background information/baseline data on the student to be used at the initial Intervention Team meeting.	0.0	0.0	87.5	12.5
5. My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency, speech, and defiant behavior.	25.0	25.0	50.0	0.0
6. The RtI team selects academic and behavioral interventions that are scientifically based.	0.0	25.0	75.0	0.0

Table 11 (continued)

Use Teams to Problem-Solve: Secondary Teachers' Responses in Percentages (n=8)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
7. The RtI team sets clear, objective, and measurable goals for student progress.	12.5	25.0	37.5	25.0
8. My school can use local or research norms (e.g. CBM) or criterion-based benchmarks (e.g. DIBELS) to judge the magnitude of the student's delay in basic academic skills.	0.0	12.5	87.5	0.0
9. My school's Intervention Team holds follow-up meetings with the referring teacher to review student progress and judge whether the intervention was effective.	12.5	37.5	50.0	0.0
10. My school's Intervention Team holds follow-up meetings with the referring teacher to review student progress and judge whether the intervention was effective.	12.5	25.0	62.5	0.0

Select the Right Intervention

The majority of the elementary teachers chose *Agree* for almost all statements listed under the theme *Select the Right Intervention* except for the statement, “My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency and defiant behavior,” of which 39.4% of elementary teachers disagreed. Elementary teachers agreed that their schools: (a) considered the ‘root cause’ of a student’s academic or behavioral difficulties (39.4%), (b) tailored intervention ideas for real-world classrooms (48.5%), and (c) used intervention strategies that were teacher friendly (36.4%), and (d) hold follow-up meetings soon after interventions were implemented.

Table 12

Select the Right Intervention: Elementary Teachers' Responses in Percentages (n=33)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
11. My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency and defiant behavior.	6.1	39.4	33.3	15.2
12. My school considers the likely 'root cause' of the student's academic or behavioral difficulties (i.e. skill deficit, lack of motivation) and chooses intervention strategies that logically address those root causes.	3.0	24.2	39.4	27.3
13. My school tailors intervention ideas as needed to be usable in real-world classrooms while being careful to preserve the treatment' qualities that make each intervention effective.	3.0	24.2	48.5	18.2
14. My school formats intervention strategies as step-by-step teacher friendly 'scripts' containing enough detail so that educators can easily understand how to put them into practice.	15.2	30.3	36.4	12.2
15. My school follows up with teachers soon after a classroom intervention has been put into place to ensure that the instructor has been able to start the intervention and is implementing correctly.	3.0	24.2	33.3	33.3

The majority of the secondary teachers chose *Agree* for almost all statements listed under the theme *Select the Right Intervention* during RtI implementation at their school except for the statement, "My school formats intervention strategies as step-by-step teacher friendly 'scripts' containing enough detail so that educators can easily understand how to put them into practice," of which 50.0% of secondary teachers disagreed. Secondary teachers responded favorably to

statements about their schools’: (a) having a library of effective interventions (50.0%), (b) considering the ‘root cause’ of a student’s academic or behavioral difficulties (37.5%), (c) tailoring interventions ideas for real-world classrooms (37.5%), and (d) having teacher follow-up soon after intervention put into place (50.0%). The findings for secondary teachers’ responses are displayed in Table 13 in percentages.

Table 13

Select the Right Intervention: Secondary Teachers’ Responses in Percentages (n=8)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
16. My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency and defiant behavior.	25.0	25.0	50.0	0.0
17. My school considers the likely ‘root cause’ of the student’s academic or behavioral difficulties (i.e. skill deficit, lack of motivation) and chooses intervention strategies that logically address those root causes.	12.5	25.0	37.5	25.0
18. My school tailors intervention ideas as needed to be usable in real-world classrooms while being careful to preserve the treatment’s qualities that make each intervention effective.	12.5	37.5	37.5	12.5
19. My school formats intervention strategies as step-by-step teacher friendly ‘scripts’ containing enough detail so that educators can easily understand how to put them into practice.	12.5	50.0	25.0	12.5
20. My school follows up with teachers soon after a classroom intervention has been put into place to ensure that the instructor has been able to start the intervention and is implementing correctly.	12.5	37.5	50.0	0.0

Monitor student progress

The majority of elementary teachers agreed to statements about the theme *Monitor Student Progress*. The findings are displayed in percentages in Table 14. Elementary teachers responded that their schools: (a) had structured classroom observations of students (60.6%), (b) collected and assessed student work (60.6%), (c) administered and scored probes (75.8%), (d) used research norms or benchmarks to determine student delays in basic academic skills (78.8%), and (e) created customized rating forms for evaluation (60.6%).

Table 14

Monitor Student Progress: Elementary Teachers Responses in Percentages (n=33)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
21. My school can conduct structured classroom observations of students to determine rates of on-task behavior, academic engagement, work completion, and rate of positive or negative interactions with adults.	3.0	18.2	60.6	12.1
22. My school can collect and assess student work products to assess the completeness and accuracy of the work to estimate the student time required to produce work.	3.0	18.2	60.6	12.1
23. My school can administer and score curriculum-based measurement (CBM) probes in basic skill areas: phonemic awareness, reading fluency, math computation, and writing.	0.0	3.0	75.8	15.2
24. My school can use local or research norms (e.g.CBM) or criterion-based benchmarks (e.g. DIBELS) to judge the magnitude of a student’s delays in basic academic skills.	0.0	3.0	78.8	12.1
25. My school can create Daily Behavior report Cards (DBRCs) or other customized rating forms to allow the instructor to evaluate key student academic and general behavior on a daily basis.	0.0	15.2	60.6	18.2

The majority of secondary teachers agreed to statements about the theme Monitor Student Progress. The findings are displayed in percentages in Table 15. Secondary teachers responded that their schools': (a) had structured classroom observations of students (62.5%), (b) collected and assessed students work (62.5%), (c) administered and scored probes (75.0%), (d) used research norms or benchmarks to determine student delays in basic academic skills (87.5%), and (e) created customized rating forms for evaluation (75.0%).

Table 15

Monitor Student Progress: Secondary Teachers' Responses in Percentages (n=8)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
26. My school can conduct structured classroom observations of students to determine rates of on-task behavior, academic engagement, work completion, and rate of positive or negative interactions with adults.	12.5	0.0	62.5	25.0
27. My school can collect and assess student work products to assess the completeness and accuracy of the work to estimate the student time required to produce work.	0.0	0.0	62.5	37.5
28. My school can administer and score curriculum-based measurement (CBM) probes in basic skill areas: phonemic awareness, reading fluency, math computation, and writing.	0.0	12.5	75.0	12.5
29. My school can use local or research norms (e.g.CBM) or criterion-based benchmarks (e.g. DIBELS) to judge the magnitude of a student's delays in basic academic skills.	0.0	12.5	87.5	0.0
30. My school can create Daily Behavior report Cards (DBRCs) or other customized rating forms to allow the instructor to evaluate key student academic and general behavior on a daily basis.	0.0	0.0	75.0	25.0

Graph data for visual analysis

The majority of elementary teachers agreed that their school could convert progress monitoring data into visual displays (45.5%) and share charted or graphed data with the school community (51.5%). The findings are displayed in percentages in Tables 16 for elementary teachers. The majority of secondary teachers agreed that their school could convert progress monitoring data into visual displays (62.5%) and share charted or graphed data with the school community (62.5%). The findings are displayed in percentages in Tables 16 for elementary teachers.

Table 16

Graph Data for Visual Analysis: Elementary Teachers' Responses in Percentages (=33)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
31. My school can convert progress monitoring data into visual displays such as time-series graphs to aid in instructional and behavioral decision-making.	0.0	21.2	45.5	24.2
32. My school can regularly share charted or graphed information with students, teachers, parents, and administrators as feedback about the effectiveness of the intervention.	3.0	24.2	51.5	15.2

In Table 17, the findings are provided for secondary teachers.

Table 17

Graph Data for Visual Analysis: Secondary Teachers' Responses in Percentages (n=8)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
33. My school can convert progress monitoring data into visual displays such as time-series graphs to aid in instructional and behavioral decision-making.	0.0	0.0	62.5	37.5
34. My school can regularly share charted or graphed information with students, teachers, parents, and administrators as feedback about the effectiveness of the intervention.	12.5	0.0	62.5	25.0

RtI Strategies: Perceived Effectiveness – Elementary/Secondary Teachers

After Part I of the survey, which contained statements about the RtI model and implementation of the RtI model, elementary and secondary teachers were asked in Part II of the survey, “Do you feel RtI strategies have effectively assisted students struggling academically or behaviorally?” The responses of elementary and secondary teachers’ responses were themed and reported verbatim using *Low Inference Descriptor*. *Low Inference Descriptors* allow for the accurate reporting of what people say without the impact of the researchers’ reconstructions or interpretive influence (Lincoln & Guba, 2000; Seale, 1999).

Generally, elementary teachers perceived RtI strategies effectively assisted students struggling academically or behaviorally. Four teachers responded negatively to the effectiveness of intervention strategies. Three additional teachers specified that RtI strategies were somewhat effective in assisting students receiving RtI supports. *Small Group Interventions*, *Student Specific Interventions*, and *Meaningful Instruction* were positive themes from elementary and secondary teacher responses. Increased *Student Motivation* and *Varied Instruction* were themes that occurred once in teacher responses for RtI effectiveness. The RtI process was described as

demonstrating a *Lack of Interventions*, *Lack of Consistency*, and a *Lack of Effective Communication* were stated as negative factors that impacted the effective implementation of the RtI process to assist struggling students. Table 18 displays the positive responses from the elementary teachers.

Table 18

Perceptions of RtI Effectiveness: Elementary Teachers

Theme of Individual Responses	Low Inference Descriptors
Small Group Interventions	“Students have improved specific skills through the small group RtI.”
Small Group Interventions	“Reading Intervention has helped struggling readers along with Tier 1 (teachers) small groups.”
Student Specific Interventions	“Students benefit if they have the instruction tailored to their needs.”
Student Specific Interventions	“The district provides students with struggling behavior with many options to put into place, but if that proves ineffective, help is sought from other resources.”
Meaningful Instruction	“It helps to keep them focused because the instruction is meaningful to them.”
Meaningful Instruction	“Trying various research based interventions rather than the same one all year and not seeing improvements.”
Student Motivation	“The Hero Card assists in motivating a student’s behavior as it is a good visual and easily understood by the student.”
Student Motivation	“Read Naturally for fluency charts student progress not only on the current story, but in comparison to other stories so they are motivated by their own progress.”
Meaningful Instruction	“I believe the RtI process helps students incredibly because they are seeing different types of teachers and being presented information in a variety of ways.”

Table 18 (continued)

Perceptions of RtI Effectiveness: Elementary Teachers

Theme of Individual Responses	Low Inference Descriptors
Lack of Interventions	“Academically – need small groups for math, rather than just a computer program. Behaviorally, we need another step or place for behavior kids to go when they are disruptive.”
Lack of Interventions	“We need a teacher for those student that do not qualify Title I services. Behaviorally, we need a plan for students who have behavioral issues that disrupt class or that are a danger to themselves of other students.”
Lack of Consistency	“Need consistent, research-based, tiered intervention systems/materials to make the intervention process consistent and measurable across grade levels”
Lack of Effective Communication	“I am not briefed regularly on their (students’) progress, nor am I aware of their specific individualized goals. I do not see substantial gains in the general education classroom from the given interventions.”
Lack of Consistency	“Intervention need is not based primarily on teacher observation, documentation, and referral, but rather on simple fluency screeners and computer-based tests.”
Lack of Interventions	“The intervention teachers consistently canceling classes and are not required to have a substitute if they are absent.”
Lack of Consistency	“classes are not consistent for the students. The interventionists do not start having class until the 2 nd six weeks of school and finish having class at the beginning of the 6 th six weeks.”
Lack of Consistency	“It feels like the process is very fluid.”
Lack of Interventions	“It is very difficult to provide RtI support when you have a large classroom. Additional support to monitor unsupported students or to provide support to the students requiring RtI.”
Lack of Effective Communication	Better communication between intervention teachers and classroom teachers. Have the classroom teachers give the reading and Star reading and math (readiness screeners) instead of the intervention teacher.

The majority of comments from secondary teachers were negative. Although positive responses were identified in the Likert scale survey instrument, only three teachers added additional comments. Responses from secondary teachers stated that while there were some positives in the district RtI program, there was areas of concern identified as well. Of the three teachers’ responses the comments focused on the themes of the *Systemic Implementation* and the *Student Specific Interventions*. Table 19 displayed the positive and negative response statements of the secondary teachers.

Table 19

Perceptions of RtI Effectiveness: Secondary Teachers

Theme of Individual Responses	Low Inference Descriptors
Systemic Implementation	“Teachers on this campus work hard and work together...just not within a system.”
Systemic Implementation	“There is no clear chain of command for RtI. We are doing a lot of the interventions but it is convoluted.”
Systemic Implementation	“A formal structure for identification and implementation of interventions would help.”
Systemic Implementation	“My school does not have a designated RtI team, nor does it have a group of people who provide follow up and consistent monitoring of interventions.”
Systemic Implementation	“Teachers have created change for students on an individual basis. Not within a system.”
Systemic Implementation	Yes, interventions help if implemented consistently across all areas.
Student Specific Interventions	“The biggest challenge has been determining what groups students should go to when they need RtI in several areas.”

Table 19 (continued)

Perceptions of RtI Effectiveness: Secondary Teachers

Theme of Individual Responses	Low Inference Descriptors
Student Specific Interventions	“Time is always a challenge. We have some students who need so much that sometimes it is difficult to prioritize their needs, based on the available time.”
Systemic Implementation	“A formal structure for identification and implementation of interventions would help.”

Researcher’s Reflection to Research Question One

Based on working with the campus staff and participating in the RtI process on several campuses, there is a lack of integration of the RtI process in the overall instructional system of the campuses. Teachers at both the elementary and secondary levels refer to the lack of a system, the roles and responsibilities of interventionists for providing the targeted interventions, and the perceptions that teachers are only able to effect change for individual students. While the Likert scale responses are predominantly positive regarding the knowledge and implementation of RtI on the campuses, the perception statements indicate that the RtI system is not as integrated or effective as the Likert scale responses would indicate.

From working with the campuses there is a lack of understanding of the basic purpose and function of a tiered intervention system. Discussions with campus staff and observations of campus-based RtI processes reveal that there is no clear understanding of how students are selected to participate in the RtI process. On one campus, all students with a failing test grade are required to be brought to the RtI committee for intervention as opposed to re-teach and re-test opportunities within the class setting. On another campus, 80% of the students were engaged in some type of

formal RtI tier, although these numbers are significantly disproportionate the expected percentages of struggling students. Further, meetings were held on one day per week and required all teachers to present before the RtI committee their student concerns. The committee consisted of one or two campus administrators, a campus-based interventionist, a special education teacher, and a general education representative not necessarily of the same grade level or content area. Meetings were held in marathon sessions of 15 to 20 minute meetings per teacher to review all failing students. Parents were not included in these meetings regardless of the level of tiered intervention serving their child. As a parent of the school district, I was not notified that both of my children were served at different times through an RtI tiered intervention program.

The district prior to the 2017-2018 school year did not have Texas Essential Knowledge and Skills (TEKS)-aligned formative assessments. Curriculum based assessments (CBA) were not developed at a district-wide level to measure progress in the district curriculum. Each classroom teacher developed their own CBA and used the test results as graded exams rather than formative assessments. Further, discussions with classroom teachers revealed a lack of knowledge regarding specific learning concerns their interventions were supposed to address. For example, a student with a deficit in phonemic awareness would require a different intervention tool than a student struggling with reading comprehension. The classroom teachers had effectively by campus procedures been removed as active interventionist for their struggling students. Students not making anticipated achievement levels were referred to campus interventionists. The interventionists were then responsible for the student's intervention program and academic progress related to the identified area of struggle. If a student continued to struggle to make progress or was unable to close academic skills gaps to be considered on-grade level functioning, the students were then referred to special education for evaluation. Students eligible for special

education were further removed from the general education class setting and the general education teachers' responsibility.

Campus administrators reported to district-level administrative staff that campus teachers were overwhelmed by the amount of documentation required for the RtI process. Campus administrators reported they did not require any Tier 1 documentation to be maintained or provided by the classroom teacher to the RtI committee. Classroom teachers were then effectively removed from the intervention process. Input at the RtI committee meetings from classroom teachers pertained to student progression in the general education curriculum and not the response to the intervention being provided.

The majority of interventions consist of scripted programs or computer programs, not all of which are research-based to be effective for the purpose they are used. There is no clear listing of the intervention programs at each campus, nor is there a list of the areas of instruction each program most effectively addresses. Interventionists who use the programs may effectively pair a student with the correct intervention, but these resources are not available to the general education classroom teacher. As a result, classroom teachers were not able to provide research-based interventions in the general education classroom setting due to a lack of resources and understanding. A review of interventions provided by classroom teachers for Tier 1 include accommodations such as small group instruction, assigned seating, check for understanding, or oral administration of assessments.

Research Question Two

To answer research Question Two, "What are the perceptions of elementary and secondary counselors regarding the implementation of the Response to Intervention (RtI) process?," elementary and secondary counselors' response statements from Part I of the survey and open-

ended question, “Do you feel the RtI strategies have effectively assisted students struggling academically or behaviorally?” were used.

The results of Part 1 of the survey describe elementary and secondary counselors’ understanding of the RtI process within this model. Those findings are listed in tables by the following themes: (a) *Understand the Model*, (b) *Use Teams to Problem-Solve*, (c) *Select the Right Interventions*, (d) *Monitor Student Progress*, and (e) *Graph Data for Visual Analysis*.

Elementary and Secondary School Counselors

Understand the Model

In District X, the majority of elementary/secondary counselors chose *Strongly Agree* or *Agree* as responses to statements regarding their understanding of the RtI model for the theme *Understand the Model*. Elementary/secondary counselors: (a) strongly agreed their principal supported RtI (50%), (b) they agreed their school staff had an overview of RtI (50%), and (c) they agreed their school staff understood the RtI model (100%). Elementary/secondary counselors were divided in their responses with 50% indicating disagree and 50% indicating they agree that the levels or Tiers for student academic or behavioral improvement were defined. Table 20 listed the overall findings in percentages.

Table 20

Understand the Model: Elementary/Secondary Counselors' Responses in Percentages (n=2)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
35. At my school the principal strongly supports Response to Intervention (RtI) as a model for identifying educational disabilities.	0.0	0.0	50.0	50.0
36. At my school the staff understands RtI and the purpose of research-based interventions.	0.0	0.0	50.0	50.0
37. At my school the majority of the staff (95% or more) understands the RtI model, believing that it may benefit teachers as well as students.	0.0	0.0	100.0	0.0
38. At my school there are three clearly defined Tiers of intervention that all staff understand.	0.0	50.0	0.0	50.0

The majority of elementary/secondary counselors chose *Strongly Agree* or *Agree* as responses to statements regarding their understanding of the RtI model for the theme *Use Teams to Problem-Solve* except for the statement, “My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency, speech, and defiant behavior,” to which 50% of elementary/secondary counselors disagreed and 50.0% agreed. Elementary/secondary counselors in District X: (a) agreed/strongly agreed that the RtI members on their campuses had a high degree of credibility among staff members (50.0%/50.0%), (b) agreed/strongly agreed that the schools intervention teams follows a formal problem-solving process (50.0%/50.0%), (c) agreed/strongly agreed the school’s intervention team created an atmosphere in which the referring teacher feels comfortable (50.0%/50.0%), (d) agreed/strongly agreed the school’s intervention team collects background information/baseline data on the student to be used at the initial intervention team meeting

(50.0%/50.0%), (f) agreed/strongly agreed the RtI team selects academic and behavioral interventions that are scientifically-based (50.0%/50.0%), (g) agreed/strongly agreed the RtI team sets clear, objective, and measurable goals for student progress (50.0%/50.0%), (h) agreed/strongly agreed the school uses local or research normed or criterion referenced benchmarks to judge the magnitude of the student’s delay in basic academic skills (50.0%/50.0%), (i) agreed the school’s intervention team documents the quality of the referring teachers efforts in implementing intervention (100%), and (j) agreed/strongly agreed the school’s intervention team holds follow-up meetings with the referring teacher to review the student progress and judge whether the intervention was effective (50.0%/50.0%). The findings are reported in Table 21.

Table 21

Use Teams to Problem-Solve: Elementary/Secondary Counselors’ responses in Percentages (n=2)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
39. The RtI team on my campus has members with a high degree of credibility among other staff members.	0.0	0.0	50.0	50.0
40. My school’s intervention team follows a formal problem-solving process.	0.0	0.0	50.0	50.0
41. My school’s intervention team creates an atmosphere in which the referring teacher feels welcome.	0.0	0.0	50.0	50.0
42. My school's Intervention Team collects background information/baseline data on the student to be used at the initial Intervention Team meeting.	0.0	0.0	50.0	50.0

Table 21 (continued)

Use Teams to Problem-Solve: Elementary/Secondary Counselors' responses in Percentages

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
43. My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency, speech, and defiant behavior.	0.0	50.0	0.0	50.0
44. The RtI team selects academic and behavioral interventions that are scientifically based.	0.0	0.0	50.0	50.0
45. The RtI team sets clear, objective, and measurable goals for student progress.	0.0	0.0	50.0	50.0
46. My school can use local or research norms (e.g. CBM) or criterion-based benchmarks (e.g. DIBELS) to judge the magnitude of the student's delay in basic academic skills.	0.0	0.0	50.0	50.0
47. My school's Intervention Team documents the quality of the referring teacher's efforts in implementing intervention ('intervention integrity').	0.0	0.0	100.0	0.0
48. My school's Intervention Team holds follow-up meetings with the referring teacher to review student progress and judge whether the intervention was effective.	0.0	0.0	50.0	50.0

Select the Right Intervention

The majority of elementary/secondary counselors agreed or strongly agreed with the majority of statements listed under the theme of Select the Right Intervention.

Elementary/secondary counselors in District X: (a) disagree (50%) or agree (50%) that the school has put together a library of effective, research-based intervention ideas for common student referral concerns, (b) agree (50%) or strongly agree (50%) the school considers the likely

‘root cause’ of the student’s academic or behavioral difficulties, (c) agree (50%) or strongly agree (50%) the school tailors intervention ideas as needed to be usable in the real-world classroom while being careful to preserve the treatment qualities that make each intervention effective, (d) agree (50%) or strongly agree (50%) the school formats intervention strategies as step-by-step teacher friendly scripts, and (e) agree (50%) or strongly agree (50%) the school follows up with teachers soon after a classroom intervention has been put into place to ensure that the intervention has been put into place to ensure that the instructor has been able to start the intervention and is implementing correctly. The findings are reported in Table 22.

Table 22

Select the Right Intervention: Elementary/Secondary Counselors’ Responses in Percentages (n=2)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
49. My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency and defiant behavior.	0.0	50.0	0.0	50.0
50. My school considers the likely ‘root cause’ of the student’s academic or behavioral difficulties (i.e. skill deficit, lack of motivation) and chooses intervention strategies that logically address those root causes.	0.0	0.0	50.0	50.0
51. My school tailors intervention ideas as needed to be usable in real-world classrooms while being careful to preserve the treatment’ qualities that make each intervention effective.	0.0	0.0	50.0	50.0
52. My school formats intervention strategies as step-by-step teacher friendly ‘scripts’ containing enough detail so that educators can easily understand how to put them into practice.	0.0	0.0	50.0	50.0
53. My school follows up with teachers soon after a classroom intervention has been put into place to ensure that the instructor has been able to start the intervention and is implementing correctly.	0.0	0.0	50.0	50.0

Monitor Student Progress

In District A the majority of elementary/secondary counselors selected *Agree* for the statements listed under the theme *Monitor Student Progress*. Elementary/secondary counselors selected *Strongly Agree* or *Agree* the statements listed under the theme *Monitor Student Progress*. Elementary/secondary counselors in District X: (a) strongly agree (50%) or agree (50%) the school can conduct structured classroom observations of students to determine rates of on-task behavior, academic engagement, work compliance, and rate of positive or negative interactions with adults , (b) strongly agree (50%) or agree (50%) the school can collect and assess student work products to assess the completeness and accuracy of the work to estimate the student time required to produce work, (c) strongly agree (50%) or agree (50%) the school can administer and score curriculum-based measurement probes in basic skill areas, (d) strongly agree (50%) or agree (50%) the school can use local or research norms or criterion-based benchmarks to judge the magnitude of the student’s delays in basic academic skills, and (e) strongly agree (50%) or agree (50%) the school can create Daily Behavior Report Cards (DBRCs) or other customized rating forms to allow the instructor to evaluate key student academic and general behavior on a daily basis. The findings are reported in Table 23.

Table 23

Monitor Student Progress: Elementary/Secondary Counselors’ Responses in Percentages (n=2)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
My school can conduct structured classroom observations of students to determine rates of on-task behavior, academic engagement, work completion, and rate of positive or negative interactions with adults.	0.0	0.0	50.0	50.0

Table 23 (continued)

Monitor Student Progress: Elementary/Secondary Counselors' Responses in Percentages (n=2)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
54. My school can collect and assess student work products to assess the completeness and accuracy of the work to estimate the student time required to produce work.	0.0	0.0	50.0	50.0
55. My school can administer and score curriculum-based measurement (CBM) probes in basic skill areas: phonemic awareness, reading fluency, math computation, and writing.	0.0	0.0	50.0	50.0
56. My school can use local or research norms (e.g.CBM) or criterion-based benchmarks (e.g. DIBELS) to judge the magnitude of a student's delays in basic academic skills.	0.0	0.0	50.0	50.0
57. My school can create Daily Behavior report Cards (DBRCs) or other customized rating forms to allow the instructor to evaluate key student academic and general behavior on a daily basis.	0.0	0.0	50.0	50.0

Graph data for Visual Analysis

The majority of elementary/secondary counselors selected *Agree* or *Strongly Agree* to statements for the theme *Graph Data for Visual Analysis*. Elementary/secondary counselors:

Strongly Agree or *Agree* to statements for the theme *Graph Data for Visual Analysis*.

Elementary/secondary counselors: strongly agree (50%) or agree (50%) the school can convert progress monitoring into visual displays such as time-series graphs to aid in instructional and behavioral decision-making, and (b) strongly agree (50%) or agree (50%) the school can regularly share charted or graphed information with students, teachers, parents, and administrators as feedback about the effectiveness of the intervention.

Table 24

Graph Data for Visual Analysis: Elementary/Secondary Counselors Responses in Percentages (n=2)

Item	Strongly Disagree	Disagree	Agree	Strongly Agree
58. My school can convert progress monitoring data into visual displays such as time-series graphs to aid in instructional and behavioral decision-making.	0.0	0.0	50.0	50.0
59. My school can regularly share charted or graphed information with students, teachers, parents, and administrators as feedback about the effectiveness of the intervention.	0.0	0.0	50.0	50.0

RtI Strategies: Perceived Effectiveness – Elementary/Secondary Counselors

After Part I of the survey, which contained statements about the RtI model and implementation of the RtI model, elementary and secondary counselors were asked in Part II of the survey, “Do you feel RtI strategies have effectively assisted students struggling academically or behaviorally?” The responses were self-reported perception of the counselors provided in response to open-ended questions. The responses of elementary and secondary counselors’ responses were themed and reported verbatim using *Low Inference Descriptor*.

Table 25

Perceptions of RtI Effectiveness: Elementary/Secondary Counselors (n=2)

Theme of Individual Responses	Low Inference Descriptors
Systemic Implementation	Since the inception of RtI, our school has implemented the process seamlessly and effectively.
Systemic Implementation	School staff has understood the process and participated cooperatively.

Table 25 (continued)

Perceptions of RtI Effectiveness: Elementary/Secondary Counselors (n=2)

Theme of Individual Responses	Low Inference Descriptors
Lack of Time	Time is always a challenge.
Lack of Time	We have some students who need so much that sometimes it is difficult to prioritize their needs, based on available time.
Identifying Struggling Learners	Yes, by keeping them on the radar by following up and by better defining their weaknesses.
Identifying Struggling Learners	Yes, many students have benefited, both academically and in their level of self-confidence.
Lack of Data Tools	Create user friendly tracking charts.
Lack of Knowledge	Better define tiers.

The themed responses were divided into the following categories: (a) *Lack of Time* was a perceived challenge, and (b) the *Identification of Struggling Learners* was seen as a positive attribute of the RtI processes, and (c) counselors' reported *Systemic Implementation* of the RtI processes as a positive. Each of these themes was reported more than once. Additionally, the following themes were reported one time: (a) *Lack of Knowledge*, and (b) *Lack of Data Tools*.

Researcher's Reflection to Research Question Two

While the counselor's responses to the survey indicate campus counselors perceive the RtI processes on the campuses implemented with fidelity and systemically. The inclusion of counselors in the RtI process varies from campus to campus, and typically the counselors are uninvolved directly in the process. Campus administration has led the RtI process on all campuses involved in this survey. The counselor responses must be interpreted with the

knowledge that they are not direct participants in the process and lack first-hand knowledge. The removal of the counselor from the RtI process has led to some unforeseen results, including concerns regarding non-compliance with 504 Child Find requirements. Counselors have been the 504 facilitators for each campus, however, they are not routinely provided with information from the RtI committee that would indicate an assessment for a suspected disability under Section 504 and/or special education.

District X has not had district-wide documents for RtI. Each campus historically has developed and implemented its own systems and processes for RtI. As a result, there has been little consistency in practices across the district. Expectations for documentation and data sources also have varied across the district. Further lacking in the district are vertically and horizontally aligned curriculum expectation. A recent review of the curriculum tools accessible through a web-based program revealed that the Texas Essential Knowledge and Skills (TEKS) for more than one course and grade level had not been updated, as a result, teachers have been working from outdated curricular expectations and state requirements. Benchmarks have been identified as not having been aligned with the curriculum that was being implemented. As a result, the benchmark system was not able to provide any reliable data.

Research Question Three

To answer Research Question Three, “What do elementary and secondary teachers and counselors perceive as challenges to RtI implementation?,” elementary and secondary teachers and counselors were asked open-ended survey questions, “What if any challenges have you faced while implementing RtI within the problem-solving team with your students and how have you overcome these challenges?.” Elementary and secondary teachers’ and counselors’ perceived response statements were themed and reported verbatim using *Low Inference Descriptors* to

allow participants' words to be experienced by the reader with no researcher interpretation to impact perception. The responses were individually themes and reported in tables. The findings are displayed in tables *Elementary Teachers*, *Secondary Teachers*, and *Elementary/Secondary Counselors*.

Elementary Teachers

Elementary teachers had several themes in their response statements for RtI challenges. The themes: (a) *Treatment Fidelity* of interventions, (b) *Lack of Knowledge* about the RtI process, and (c) the RtI process was considered *Time Consuming* for elementary teachers' response statements for RtI challenges. Each theme occurred more than once in the response statements from elementary teachers. The theme of *Lack of Problem Solving Teams (PST)* occurred once. The themed response statements of elementary teachers are displayed in Table 26.

Table 26

RtI Challenges: Elementary Teachers

Theme of Individual Responses	Low Inference Descriptors
Treatment Fidelity	There was not always follow through with all members of the team, while it was absolutely expected that I follow through with everything noted in the RtI meetings.
Lack of Knowledge	Challenges: limited, or reluctant home support, and being available to meet with teacher as needed. Overcome challenges: continue communication with family, be persistent and patient to meet with team.
Treatment Fidelity	Behavior RTI is lacking a step. I continue to work with my student(s)' behavior or send to the office.
Treatment Fidelity	Need consistent, research-based, tiered intervention system/materials
Treatment Fidelity	make the intervention process consistent and measureable across grade levels

Table 26 (continued)

RtI Challenges: Elementary Teachers

Theme of Individual Responses	Low Inference Descriptors
Treatment Fidelity	The Intervention teachers consistently canceling classes and are not required to have a sub if they are absent.
Treatment Fidelity	These teachers spend the first 6 weeks testing the students and the last 3 weeks of the year testing. They do not have substitutes when they are absent so the children miss class.
Time Consuming	Meeting often to check often to check progress can present its own set of problems. This usually can only happen after school hours.
Treatment Fidelity	Maintaining and providing consistent implementation of solutions among a variety of support people can be challenging.
Lack of PST	There hasn't really been a problem solving part.
Lack of Knowledge	If they are struggling academically they are referred to Special Education. This is a problem.

Secondary Teachers

Secondary teachers had several recurring themes in their response statements for RtI challenges. The themes: (a) *Lack of PST Implementation* for intervention planning and treatment and (b) *Lack of Resources* and *High Students Needs* created significant challenges and barriers for RtI implementation. Each theme occurred more than once for secondary teachers. Additional barriers identified once include: (a) *Lack of Classroom Support*, (b) *Irregular PST Meetings*, (c) *Lack of Knowledge* about the RtI process, and (d) the RtI process was viewed as *Time Consuming*. These themed response statements are displayed in Table 27.

Table 27

RtI Challenges: Secondary Teachers

Theme of Individual Responses	Low Inference Descriptors
Lack of PST Implementation	There is no clear chain of command for RtI... We are doing a lot of interventions... but it is convoluted.
Lack of PST Implementation	My school does not have a designated RtI team, nor does it have a group of people who provide follow up and consistent monitoring of interventions.
Lack of Classroom Support	Classroom support. It is very difficult to provide RtI support when you have a large classroom. Additional support to monitor unsupported students or to provide support to the students requiring RtI is needed.
Lack of PST Implementation	Not enough support from intervention team, RtI meeting biased based on one administrator's decision, no data from intervention teachers, all must come from classroom teacher.
Lack of Knowledge	The process falls apart by the end of the year. Teachers do not have a clear procedure for retention or placements of students who are still seriously behind or who have failed subjects for the year.
Irregular PST Meetings	We have not had an RtI meeting since April, and we need to discuss the year-long progress or lack of progress of particular students.
Lack of Resources, High Student Needs	The biggest challenge has been determining what groups student should go to when they need RtI in several areas.
Lack of Resources, High Student Needs	Meeting needs can be challenging based on a variety of them. The teams have come together in a joint effort to accomplish this goal.
Time Consuming	Too much responsibility for data collection given to the classroom teacher. Time consuming process of students' selection for RtI given to teacher and not interventionists.

Elementary and Secondary Counselors

Elementary and secondary counselors had few challenges to RtI implementation identified. Themes for the elementary and secondary counselors can be identified as (a) *Systemic Implementation*, and (b) *Lack of Time*. Each of these themes were reported twice. According to the information shared by counselors, there are no identified barriers to implementation save the

lack of time in implementing the RtI process, especially for students with multiple needs to address through interventions. These themed response statements are displayed in Table 28.

Table 28

RtI Challenges: Elementary and Secondary Counselors

Theme of Individual Responses	Low Inference Descriptors
Systemic Implementation	Since the inception of RtI, our school has implemented the process seamlessly and effectively.
Systemic Implementation	School staff has understood the process and participated cooperatively.
Lack of Time	Time is always a challenge.
Lack of Time	We have some students who need so much that sometimes it is difficult to prioritize their needs, based on available time.

Researcher Reflections to Research Question Three

The secondary campus has struggled to implement academic and behavioral tiered support systems. The framework for tiers one and two for behavior interventions were not implemented through the general education process. Rather, special education staff was requested to provide additional supports to students outside of the special education tier three behavior support program. The focus of the secondary campus is not so much on reducing achievement deficits but rather in remediation based on state assessment results. In speaking with campus staff and working with campus administration, there is a theoretical understanding of the RtI process but no clear understanding of implementation of a systemic tiered response process. RtI meetings primarily are administrator driven and are not necessarily based in strong data. Further, at the secondary levels a review of the documentation system revealed that the data

collection continues to not be entered into the district system. At this time, it is not possible for central office to provide any oversight or support to the campus based on RtI student data as the data does not exist. This lack of data further indicates a lack of understanding regarding the RtI process and the purposes behind the problem-solving team intervention development.

Research Question Four

To answer research Question four, “*What recommendations do elementary and secondary teachers and counselors perceive will improve the Response to Intervention (RtI) process?*,” elementary and secondary teachers and counselors were asked two open-ended questions: a) “*What recommendations do you believe will improve the RtI process on your campus to better assist students struggling academically and/or behaviorally?*” and b) “*Do you have additional comments or concerns about RtI that you would like to contribute that were not addressed in the survey?*”. Elementary and secondary teachers’ and counselors’ perceived response statements were themed and reported verbatim using *Low Inference Descriptors* which allow the participants exact words to be reported and reflected within the research.

The recommendations from both the elementary and secondary teachers could be thematically divided into two areas: (a) a need for *Systemic Implementation* within a clearly defined process, and (b) *Lack of Resources for High Student Needs* remains a large concern for both elementary and secondary teachers. The *Lack of Resources for High Student Needs* included concerns for academic and behavioral interventions. Strategies recommended included social skills instruction in tiered interventions, crisis planning for volatile student behavior, and developing systems to provide support to students with multiple needs. The recommendations for Systemic Implementation include identifying a formal structure for RtI, communication processes within the RtI processes, the provision of consistent, research-based interventions, and specified goals

with progress monitoring. Elementary and secondary counselors had no recommendations for improvement to the RtI process. Findings are reported in Tables 29 and 30.

Table 29

Recommendations to Improve RtI: Elementary Teachers

Theme of Individual Responses	Low Inference Descriptors
Systemic Implementation Lack of Resources, High Student Needs	We need a teacher for those students that do not qualify for Title 1 services. Behaviorally we need a plan for students who have behavioral issues that disrupt the class or that are a danger to themselves or other students.
Systemic Implementation	Teachers waiting until they have implemented an intervention and collected data before asking to meet on a student. Trying various research based interventions rather than the same one all year and not seeing improvements.
Systemic Implementation	The administration needs to back the teachers more with recommendations.
Systemic Implementation	All members following through with what is noted in the meeting.
Lack of Resources, High Student Needs	Academically - need small groups for math, rather than just a computer program; Behaviorally, we need another step or place for behavior kids to go when they are disruptive.
Systemic Implementation	Need consistent, research-based, tiered intervention system/materials to make the intervention process consistent and measureable across grade levels
Lack of Resources, High Student Needs	Have the students go on the computer program in the classroom not for 20 minutes of their 45 minute class- they need teacher directed instruction.
Systemic Implementation	Better communication between intervention teachers and classroom teachers. Have classroom teachers give the Star Reading and Math tests instead of the intervention teachers. Have substitutes when the intervention teacher is absent.

Table 30

Recommendations to Improve RtI: Secondary Teachers

Theme of Individual Responses	Low Inference Descriptors
Systemic Implementation	More consistency. It feels like the process is very fluid.
Systemic Implementation	Intervention teachers should make decisions regarding placement into RTI/removal from RTI. RTI groups should be constructed by Intervention teachers/administrators, not classroom teacher.
Systemic Implementation	A specific, measurable objective or goal for each student referred to RTI. This goal or criterion would have to be met before the student is exited from RTI group. But this cannot fall on the regular classroom teachers: we have already become paperwork hustlers/documentation delirious!!
Lack of Resources, High Student Needs	A system that determines how best to serve multi-need students.
Lack of Resources, High Student Needs	Social Skills implementation at a different more specific level as has been done in the past would help improve the behavioral interventions at this time.
Lack of Resources, High Student Needs	More responsibility to Interventionists in selecting and monitoring student achievement during RTI process.
Systemic Implementation	Starting with the above answer would be a great first step....Teachers on this campus work hard and work together....just not within a system.
Systemic Implementation	A formal structure for identification and implementation of interventions would help.

Researcher Reflections to Research Question Four

The recommendations from the open-ended questions would reflect many of my own recommendations. Previously, intervention staff were funded through Title I funding. As a result, the only students who were able to access the interventionists were those who qualified to receive Title I services and supports. Students who were not served through the Title program did not have access to the campus interventionists.

CHAPTER V

CONCLUSIONS AND SUMMARY

The purpose of this chapter are to summarize and discuss my research findings of the implementation of the RtI process from the teachers' and counselors' perspectives, determine possible future implications based on the findings, and to make recommendations based on the study results for future research. The discussion, implications, and recommendations for future research were associated with the three-tiered RtI model within a problem-solving framework.

The purpose was to describe K-8 teachers' and counselors' perceptions of the implementation of the Response to Intervention (RtI) process in a Texas Education Agency categorized, Other Central City Suburban Texas school district which has implemented RtI strategies within a three-tiered problem-solving team (PST) framework for 5 or more years. The National Dissemination Center for Children with Disabilities (NICHCY, an acronym derived from its original name, National Information Center for Handicapped Children and Youth) is sponsored by the U.S. Department of Education to operate as a centralized resource for information on special education and children with disabilities ages birth through 21. NICHCY, along with the National Center on Response to Intervention define the RtI process (National Center on Response to Intervention, 2010; NICHCY, 2012). Specific characteristics of an RtI system include multi-level system consists of three tiers of increasingly intense and individualized interventions in a problem-solving model. Students in Tier 1 receive research-based instruction as part of a class group, or through small group instruction. Students not responding to the first level of interventions move to the second tiered level of intervention. Tier 2 interventions are more targeted and intense interventions that are implemented for a longer

period of time. The intensity of the interventions are adjusted depending on the student's response to the interventions provided. For students continuing to struggle after the provision of more targeted interventions, Tier 3 provides the most individualized instructional and behavioral interventions within the general education program (RtI Action Network, 2014, para 5).

Purposeful sampling allows the researcher to select information-rich (Patton, 2005) cases which will provide a greater knowledge and understanding to address the purpose of the research. A purposeful sample of K-8 teachers (which include general education teachers, special education teachers, and specialists) and counselors who were employed in an Other Central Texas Suburban school district were selected because (a) the district had implemented RtI strategies within a problem-solving team (PST) framework for two years of more, and (b) teachers and counselors were trained using a three-tiered model. Thirty-three elementary teachers, 8 secondary teachers, 2 elementary counselors and 1 secondary counselor responded to the survey. Open-ended questionnaire data were collected from the 41 who voluntarily responded to the open-ended questions from the survey.

Research Question One

The Response to Intervention School Readiness Survey (Wright, 2006) was used to answer research questions one. The survey was divided into five themes:(a) Understand the Model, (b) Use Teams to Problem-Solve, (c) Select the right Interventions, (d) Monitor Student Progress, and (e) Graph Data for Visual Analysis. The data were analyzed by these themes. As a replication study, one of the purposes of the student was to combine the results of prior research with new results as a student designed to replicate and extend the initial results (Bonett, 2012: Burma, Reed, & Alm, 2010). Data was analyzed on the same themes comparing the research

findings from the initial study conducted by Lilly (2010). Further, as an extension of the original methodology utilized by Lilly, I included personal reflections as a participant researcher.

An important aspect of RtI implementation was to understand the RtI model to effectively implement the process. Tier I begins in the general education classroom with quality instruction and interventions provided by classroom teachers (Deshler & Cornett, 2012; Fuchs & Fuchs, 2006; Glover & DiPenna, 2007; Hoover, 2011; Kupzyk, Edward, Ihlo, & Young, 2010). Deshler and Cornett (2012) explain that the most important indicator of student success is the instruction students receive in the general education classroom setting.

Data revealed elementary and secondary teachers either Strongly Agree or Agree to understanding the components of the RtI model. The majority of elementary teachers chose *Strongly Agree* or *Agree* as responses to statements regarding their understanding of the RtI model for the theme *Understand the Model*. Elementary teachers: (a) strongly agreed their principal supported RtI (57.6%), (b) they agreed their school staff had an overview of RtI (48.5%), (c) they agreed their school staff understood the RtI model (45.5%), and (d) they strongly agreed that the levels or Tiers for student academic or behavioral improvement were defined (39.4%). Secondary teachers: (a) strongly agreed their principal supported RtI (50.0%), (b) they agreed their school staff had an overview of RtI (50.0%), (c) they agreed their school staff understood the RtI model (50.0%), and (d) they agreed that the levels or Tiers for student academic or behavioral improvement were defined (50.0%).

Comparing the results for District A and District X, there is significant agreement in the selection of *Strongly Agree* or *Agree* as responses to statements regarding their understanding of the RtI model for the theme *Understand the Model*. The elementary teachers in District A: (a) strongly agreed that their principal supported RtI (56.1%), (b) they agreed their school staff had

an overview of RtI (50.4%), (c) they agreed their school staff had an understanding of the RtI model (45.5%), and (d) they agreed that programs and resources for academic or behavioral improvement were organized into three levels or Tiers (41.3%). Secondary teachers in District A: (a) agree that their principal supported RtI (79.2%), (b) they agreed their school staff had an overview of RtI (66.7%), (c) they agreed their school staff had an understanding of the of the RtI model (45.8%), and (d) agreed that programs and resources for academic and/or behavioral improvement were organized into three levels or Tiers (50.0%).

Problem-solving teams of PSTs are used as a framework for RtI implementation. Researchers describe the role of the PST in the RtI model to review data, progress monitor, and evaluate student progress (Deshler & Cornett, 2012; Fletcher & Vaughn, 2009; Klinger & Edwards, 2006; Hoover, 2011; Kupzyk, Edward, Ihlo, & Young, 2010). PSTs are responsible for developing instructional plans to improve learner outcomes for struggling students (Johnson, Mellard, Fuchs, & McKinight, 2006). PSTs are responsible for developing individualized learner plans (Lindstrom & Sayeski, 2013).

Data revealed the majority of elementary and secondary teachers chose Agree for their response choice for the theme Use Teams to Problem-Solve. Elementary teachers agreed that their schools; intervention teams: (a) were credible (54.5%), (b) followed a formal PST model during meetings (45.5%), (c) made teachers feel welcomed and supported (48.5%), (d) used background/baseline information (48.5%), (e) inventoried school-wide resources (54.5%), (f) used interventions that were scientifically-based (54.5%), (g) offered clear objectives and measurable goals for students (36.4%), (h) used various methods of assessments (82.0%), (i) implemented intervention integrity (39.3%), and (j) followed-up through team meetings with referring teacher (36.4%).

Secondary teachers agreed that their schools; intervention teams: (a) were credible (50.0%), (b) followed a formal PST model during meetings (62.5%), (c) made teachers feel welcomed and supported (75.0%), (d) used background/baseline information (87.5%), (e) inventoried school-wide resources (50.0%), (f) used interventions that were scientifically-based (75.0%), (g) offered clear objectives and measurable goals for students (37.5%), (h) used various methods of assessments (87.5%), (i) implemented intervention integrity (30.0%), and (j) followed-up through team meetings with referring teacher (62.5%).

The majority of elementary teachers in District A selected *Agree* as their response choice for the theme *Use Teams to Problem-Solve*. Elementary teachers in District A: (a) agreed their campus intervention teams were credible (40.9%), (b) followed a formal PST model during meetings (50.0%), (c) made teachers feel welcomed and supported (40.9%), (d) used background/baseline information (54.5%), (e) inventoried school-wide resources (54.5%), (f) used interventions that were scientifically-based (56.8%), (g) offered clear, objectives, and measurable goals for students (52.3%), (h) used various methods of assessments (54.5%), (i) implemented intervention integrity (36.4%), and (j) followed-up through team meetings with referring teacher (36.4%).

The majority of secondary teachers in District A chose *Agree* for the theme *Use Teams to Problem-Solve*. Secondary teachers agreed that their schools' intervention teams: (a) were credible (58.3%), (b) followed a formal PST model during meetings (58.3%), (c) made teachers feel welcomed and supported (66.7%), (d) used background/baseline information (62.5%), (e) inventoried school-wide resources (54.2%), (f) used interventions that were scientifically-based (66.7%), (g) offered clear, objective, and measurable goals for students (62.5%), (h) used various

methods of assessments (70.8%), (i) implemented intervention integrity (70.8%), and (j) followed-up through team meetings with referring teacher (54.2%).

An important feature of the RtI implementation process included selecting the right intervention and utilizing evidence-based instructional practices in the general education classroom and quality instruction (Johnson, Mellard, Fuchs, & McKnight, 2006). A data-based decision-making process based on data analysis and defined learner outcomes is an additional component of selecting the right intervention. The PST is to allow for diverse knowledge and expertise to improve practice. Multiple researchers have agreed in study findings that a successful RtI model must have incremental data gathering and analysis of the results (Fuchs & Fuchs, 2006; Hoover, 2011; Mastropieri & Scruggs, 2005; Reschly, 2005).

The majority of elementary teachers chose Agree for almost all statements listed under the theme Select the Right Intervention during RtI implementation at their school except for the statements, “My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency and defiant behavior,” of which 39.4% of elementary teachers disagreed. Elementary teachers selected Agree that their schools: (a) considered the ‘root cause’ of a student’s academic or behavioral difficulties (39.4%), (b) tailored intervention ideas for real-world classrooms (48.5%), and (c) used intervention strategies that were teacher friendly (36.4%).

The majority of secondary teachers chose Agree for almost all statements listed under the theme Select the Right Intervention during the RtI implementation at their school except for the statement, “My school formats intervention strategies as step-by-step teacher friendly ‘scripts’ containing enough detail so that educators can easily understand how to put them into practice,” of which 50.0% of secondary teachers disagreed. Secondary teachers selected agree to statements

that their schools: (a) considered the ‘root cause’ of a student’s academic or behavioral difficulties (37.5%), (b) tailored intervention ideas for real-world classrooms (37.5%), (c) had a library of effective interventions (50.0%), and (d) had teacher follow-up meetings soon after interventions were put in place (50.0%).

The majority of elementary teachers in District A chose *Agree* for almost all statements listed under the theme *Select the Right Intervention* during RtI implementation at their school except for the statement by District A teachers, “My school follows up with teachers soon after a classroom intervention has been put into place to ensure that the instructor has been able to start the intervention and is implementing correctly,” of which 43.2% of the elementary teachers represented in District A disagreed. District X teachers, however, chose *Agree* for this statement with 33.3%. Further variance was identified in the statement, “My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency and defiant behavior,” of which 39.4% of elementary teachers in District X disagreed. Elementary teachers in District A agreed at a rate of 44.2%. Elementary teachers in District A agreed that their schools: (a) considered the ‘root cause’ of a student’s academic or behavioral difficulties (45.5%), (b) tailored intervention ideas for real-world classrooms (47.7%), and (c) used intervention strategies that were teacher friendly (40.9%).

The majority of the secondary teachers chose *Agree* for almost all statements listed under the theme *Select the Right Intervention* during RtI implementation at their school except for the statement by District X teachers, “My school formats intervention strategies as step-by-step teacher friendly ‘scripts’ containing enough detail so that educators can easily understand how to put them into practice,” of which 50.0% of District X teachers disagreed compared to 58.3% of District A teachers agreed with the statement. Secondary teachers responded favorably to

statements about their schools': (a) having a library of effective interventions (45.8%), (b) considering the 'root cause' of a student's academic or behavioral difficulties (62.2%), (c) tailoring interventions ideas for real-world classrooms (62.5%), and (d) having teacher follow-up soon after intervention put into place (50.0%).

Progress monitoring is a critical component of the RTI process. Assessments determine baseline levels, area of targeted intervention, and allows for the monitoring of academic and behavioral growth (McMaster, Parker, & Jung, 2012; Stecker, Fuchs, & Fuchs, 2008).

Monitoring the progress of at-risk students allows the PST to determine student responsiveness to instruction, the possible need for more intense interventions, and to evaluate the effects of individualized interventions for struggling students. (McMaster, Parker, & Jung, 2012).

The majority of elementary teachers agreed to statements about the theme *Monitor Student Progress*. Elementary teachers responded that their schools: (a) had structured classroom observations of students (60.6%), (b) collected and assessed student work (60.6%), (c) administered and scored probes (75.8%), (d) used research norms or benchmarks to determine student delays in basic academic skills (78.8%), and (e) created customized rating forms for evaluation (60.6%).

The majority of secondary teachers agreed to statements about the theme *Monitor Student Progress*. Secondary teachers responded that their schools': (a) had structured classroom observations of students (62.5%), (b) collected and assessed students work (62.5%), (c) administered and scored probes (75.0%), (d) used research norms or benchmarks to determine student delays in basic academic skills (87.5%), and (e) created customized rating forms for evaluation (75.0%).

The majority of elementary teachers in District A agreed to statements about the theme *Monitor Student Progress*. Elementary teachers responded that their schools: (a) had structured classroom observations of students (40.9%), (b) collected and assessed student work (65.9%), (c) administered and scored probes (59.1%), (d) used research norms or benchmarks to determine student delays in basic academic skills (59.1%), and (e) created customized rating forms for evaluation (50.0%).

The majority of secondary teachers in District A agreed to statements about the theme *Monitor Student Progress*. Secondary teachers in District A responded that their schools': (a) had structured classroom observations of students (66.7%), (b) collected and assessed students work (70.8%), (c) administered and scored probes (66.7%), (d) used research norms or benchmarks to determine student delays in basic academic skills (66.7%), and (e) created customized rating forms for evaluation (62.5%).

An important component of the RtI process is the ability to monitor and analyze student data to determine progress, intervention revisions, or possibly referral to more intense interventions. The ability to graph data allows the RtI PST to conduct data trend analysis and to formulate trend line decision points (Ardoin, Christ, Morena, Cormier, & Klingbeil, 2013). Further, the visual representation allows all members of the PST, including parents, the ability to see and understand the student progress throughout the monitoring process.

The majority of elementary teachers agreed that their school converted progress monitoring data into visual displays (45.5%) and shared charted or graphed data with the school community (51.5%). The majority of secondary teachers agreed that their school converted progress monitoring data into visual displays (62.5%) and shared charted or graphed data with the school community (62.5%).

The majority of elementary teachers in District A agreed that their school converted progress monitoring data into visual displays (52.3%) and shared charted or graphed data with the school community (47.7%). The majority of secondary teachers in District A agreed that their school converted progress monitoring data into visual displays (62.5%), and shared charted or graphed data with the school community (66.7%).

Research Question Two

The role of instructional staff has changed with the implementation of RtI. Campus and district level support staff have been required to support teachers in data analysis, intervention development and implementation, data collection, and to consult with instructional staff. Campus administrative and support staff now is required to monitor the implementation of the RtI process on the campus, and to closely monitor the quality of instruction within the general education setting (Johnson, Mellard, Fuchs, & McKnight, 2006). Counselors are now required to take a more active role in the treatment and prevention of academic struggles (Johnson, Mellard, Fuchs, & McKnight, 2006).

To answer research Question Two, “What are the perceptions of elementary and secondary counselors’ regarding the implementation of the Response to Intervention (RtI) process?,” elementary and secondary counselors’ response statements from Part I of the survey and open-ended question, “Do you feel the RtI strategies have effectively assisted students struggling academically or behaviorally?” were used.

The results of Part 1 of the survey described elementary and secondary counselors’ understanding of the RtI process within this model. Those findings were divided into the following themes: (a) *Understand the Model*, (b) *Use Teams to Problem-Solve*, (c) *Select the Right Interventions*, (d) *Monitor Student Progress*, and (e) *Graph Data for Visual Analysis*.

In District X, the majority of elementary/secondary counselors chose *Strongly Agree* or *Agree* as responses to statements regarding their campuses' understanding of the RtI model for the theme *Understand the Model*. Elementary/secondary counselors: (a) strongly agreed their principal supported RtI (50%), (b) they agreed their school staff had an overview of RtI (50%), and (c) they agreed their school staff understood the RtI model (100%). Elementary/secondary counselors were divided in their responses with 50% indicating disagreement and 50% indicating agreement that the levels or Tiers for student academic or behavioral improvement were defined.

In District A, the majority of elementary/secondary counselors also selected *Strongly Agree* or *Agree* as responses to statements regarding their campus' understanding of the RtI model for the theme *Understanding the Model*. Elementary/secondary counselors: (a) strongly agreed their principal supported RtI (54.4%), (b) strongly agreed their school staff had an overview of RtI (52.3%), (c) they agreed their school staff understood the RtI model (45.5%). Elementary/secondary counselors in District A were also divided evenly between agree (43.2%) and strongly agree (43.2%) that the levels or Tiers for student academic or behavioral improvement were defined.

The majority of elementary/secondary counselors chose *Strongly Agree* or *Agree* as responses to statements regarding their understanding of the RtI model for the theme *Use Teams to Problem-Solve* except for the statement, "My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency, speech, and defiant behavior," to which 50% of elementary/secondary counselors disagreed and 50.0% agreed. Elementary/secondary counselors in District X: (a) agreed/strongly agreed that the RtI members on their campuses had a high degree of credibility among staff members (50.0%/50.0%), (b) agreed/strongly agreed that the schools intervention teams follows

a formal problem-solving process (50.0%/50.0%), (c) agreed/strongly agreed the school's intervention team created an atmosphere in which the referring teacher feels comfortable (50.0%/50.0%), (d) agreed/strongly agreed the school's intervention team collects background information/baseline data on the student to be used at the initial intervention team meeting (50.0%/50.0%), (f) agreed/strongly agreed the RtI team selects academic and behavioral interventions that are scientifically-based (50.0%/50.0%), (g) agreed/strongly agreed the RtI team sets clear, objective, and measurable goals for student progress (50.0%/50.0%), (h) agreed/strongly agreed the school uses local or research normed or criterion referenced benchmarks to judge the magnitude of the student's delay in basic academic skills (50.0%/50.0%), (i) agreed the school's intervention team documents the quality of the referring teachers efforts in implementing intervention (100%), and (j) agreed/strongly agreed the school's intervention team holds follow-up meetings with the referring teacher to review the student progress and judge whether the intervention was effective (50.0%/50.0%).

Elementary/secondary counselors in District A: (a) agreed that the RtI members on their campuses had a high degree of credibility among staff members (58.3%), (b) agreed that the schools intervention teams follows a formal problem-solving process (66.7%), (c) the school's intervention team created an atmosphere in which the referring teacher feels comfortable (66.7%), (d) the school's intervention team collects background information/baseline data on the student to be used at the initial intervention team meeting (58.3%), (e) the school had put together a library of effective, research-based intervention ideas for common student referral concerns (66.7%), (f) the RtI team selects academic and behavioral interventions that are scientifically-based (58.3%), (g) the RtI team sets clear, objective, and measurable goals for student progress (75%), (h) the school uses local or research normed or criterion referenced

benchmarks to judge the magnitude of the student's delay in basic academic skills (66.7%), (i) the school's intervention team documents the quality of the referring teachers efforts in implementing intervention (66.7%), and (j) the school's intervention team holds follow-up meetings with the referring teacher to review the student progress and judge whether the intervention was effective (41.7%).

Select the Right Intervention

In District X the majority of elementary/secondary counselors agreed or strongly agreed with the majority of statements listed under the theme of Select the Right Intervention. Elementary/secondary counselors in District X: (a) disagree (50%) or agree (50%) that the school has put together a library of effective, research-based intervention ideas for common student referral concerns, (b) agree (50%) or strongly agree (50%) the school considers the likely 'root cause' (50%) of the student's academic or behavioral difficulties, (c) agree (50%) or strongly agree (50%) the school tailors intervention ideas as needed to be usable in the real-world classroom while being careful to preserve the treatment qualities that make each intervention effective, (d) agree (50%) or strongly agree (50%) the school formats intervention strategies as step-by-step teacher friendly scripts, and (e) the school follows up with teachers soon after a classroom intervention has been put into place to ensure that the intervention has been put into place to ensure that the instructor has been able to start the intervention and is implementing correctly.

In District A the majority of the elementary/secondary counselors selected *Agree* for the statements listed under the theme *Select the Right Intervention*. Elementary/secondary counselors in District A agree: (a) the school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency and

defiant behavior (63.6%), (b) the school considers the likely “root cause” of the student’s academic or behavioral difficulties (66.7%), (c) the school tailors intervention ideas as needed to be usable in real-world classrooms while being careful to preserve the treatment qualities that make interventions effective (75%), (d) the school formats intervention strategies as step-by-step teacher friendly scripts (66.7%), and (e) the school follows up with teachers soon after a classroom intervention has been put into place to ensure the instructor has been able to start the intervention and is implementing correctly (66.7%).

Monitor Student Progress

In District X the majority of elementary/secondary counselors selected *Strongly Agree* or *Agree* for the statements listed under the theme *Monitor Student Progress*. Elementary/secondary counselors in District X: (a) strongly agree (50%) or agree (50%) the school can conduct structured classroom observations of students to determine rates of on-task behavior, academic engagement, work compliance, and rate of positive or negative interactions with adults , (b) strongly agree (50%) or agree (50%) the school can collect and assess student work products to assess the completeness and accuracy of the work to estimate the student time required to produce work, (c) strongly agree (50%) or agree (50%) the school can administer and score curriculum-based measurement probes in basic skill areas, (d) strongly agree (50%) or agree (50%) the school can use local or research norms or criterion-based benchmarks to judge the magnitude of the student’s delays in basic academic skills, and (e) strongly agree (50%) or agree (50%) the school can create Daily Behavior Report Cards (DBRCs) or other customized rating forms to allow the instructor to evaluate key student academic and general behavior on a daily basis.

In District A the majority of elementary/secondary counselors selected *Agree* for the statements listed under the theme *Monitor Student Progress*. Elementary/secondary counselors in District A agree: (a) the school can conduct structured classroom observations of students to determine rates of on-task behavior, academic engagement, work compliance, and rate of positive or negative interactions with adults (50%), (b) the school can collect and assess student work products to assess the completeness and accuracy of the work to estimate the student time required to produce work (58.3%), (c) the school can administer and score curriculum-based measurement probes in basic skill areas (58.3%), (d) the school can use local or research norms or criterion-based benchmarks to judge the magnitude of the student's delays in basic academic skills (58.3%), and (e) the school can create Daily Behavior Report Cards (DBRCs) or other customized rating forms to allow the instructor to evaluate key student academic and general behavior on a daily basis (41.7%).

Graph Data for Visual Analysis

In District X the majority of elementary/secondary counselors *Strongly Agree* or *Agree* to statements for the theme *Graph Data for Visual Analysis*. Elementary/secondary counselors in District X: strongly agree (50%) or agree (50%) the school can convert progress monitoring into visual displays such as time-series graphs to aid in instructional and behavioral decision-making, and (b) strongly agree (50%) or agree (50%) the school can regularly share charted or graphed information with students, teachers, parents, and administrators as feedback about the effectiveness of the intervention.

The majority of elementary/secondary counselors in District A selected *Agree* to statements for the theme *Graph Data for Visual Analysis*. Elementary/secondary counselors in District A: agree the school can convert progress monitoring data into visual displays such as

time-series graphs to aid in instructional and behavioral decision-making (58.3%), and agree the school can regularly share charted or graphed information with students, teachers, parents, and administrators as feedback about the effectiveness of the intervention (58.3%).

Research Question Three

Several challenges have been identified for teachers and counselors involved in the RtI process. School personnel are required to take on different roles within the educational process. RtI implementation includes the changing roles of instructional staff, personnel responsibilities, program funding, and a re-evaluation of the historic separation between special and general education (Fuchs, Fuchs, & Stecker, 2010; Werts, Lambert, & Carpeter, 2009). As school personnel acquire new responsibilities, there is uncertainty in how to perform these new roles (Bean & Lillenstein, 2012). Educational staff reported that they are not necessarily as knowledgeable about areas of education as they need to be in RtI processes. Training of staff in effective implementation is needed (Stecker, Fuchs, & Fuchs, 2008). Resource allocation is an additional concern including the amount of time and staff required to implement a RtI process (Mellard, McKnight, & Woods, 2009).

Even effective practices do not work if they are not implemented with integrity (VanDerHeyden & Harvey, 2012). Treatment integrity is a required component of any successful intervention as it increases the likelihood that the intervention will be successful. Interventions that have been research-based and have been shown to work are not ensured to work when it is implemented. Without treatment integrity it is not possible to determine if poor learner outcomes are due to the poor implementation of a potentially effective intervention, or an ineffectual intervention implemented with integrity. Additional factors impacting the RtI process include cultural, racial, and linguistic differences remain barriers to effective intervention for some

student populations (Artiles, Kozelski, Trent, Osher, & Ortiz, 2010; Blatchley & Lau, 2010; Finch, 2012; Klingner & Edwards, 2006).

Elementary teachers had several themes in their response statements for RtI challenges. The themes: (a) *Treatment Fidelity* of interventions, (b) *Lack of Knowledge* about the RtI process, and (c) the RtI process was considered *Time Consuming* for elementary teachers' response statements for RtI challenges. Each theme occurred more than once in the response statements from elementary teachers. The theme of *Lack of Problem Solving Teams (PST)* occurred once.

Secondary teachers had several recurring themes in their response statements for RtI challenges. The themes: (a) *Lack of PST Implementation* for intervention planning and treatment and (b) *Lack of Resources* and *High Students Needs* created significant challenges and barriers for RtI implementation. Each theme occurred more than once for secondary teachers. Additional barriers identified once include: (a) *Lack of Classroom Support*, (b) *Irregular PST Meetings*, (c) *Lack of Knowledge*, and (d) the RtI process was viewed as *Time Consuming*.

Research Question Four

High quality instruction is the basic structure that comprises the tiered RtI intervention model. For RtI to be of benefit to educational decision-making, all educators must engage in a systemic paradigm shift that views the RtI process as the end goals and not as a conduit for a referral to specialized services for identified disabilities (Deshler & Cornett, 2012; Hoover, 2010; Klingner & Bianci, 2006). A review of instructional practices in District X by central office administrative staff revealed the following concerns: (a) lack of aligned curriculum, (b) benchmark system misaligned to the district curriculum, (c) no access to tools for data analysis and disaggregation by instructional staff, and (d) a lack of opportunity for many students to

engage in RtI interventions with specially trained intervention staff due to funding constraints. In reviewing the recommendations of the counselors, coupled with their reports of seamless RtI implementation there appears to be incongruity with the feedback provided by elementary and secondary teachers.

The recommendations from both the elementary and secondary teachers could be thematically divided into two areas: (a) a need for *Systemic Implementation* within a clearly defined process, and (b) *Lack of Resources for High Student Needs* remains a large concern for both elementary and secondary teachers. The *Lack of Resources for High Student Needs* included concerns for academic and behavioral interventions. Strategies recommended included social skills instruction in tiered interventions, crisis planning for volatile student behavior, and developing systems to provide support to students with multiple needs. The recommendations for *Systemic Implementation* include identifying a formal structure for RtI, communication processes within the RtI processes, the provision of consistent, research-based interventions, and specified goals with progress monitoring. Elementary and secondary counselors had no recommendations for improvement to the RtI process.

Implementation of RtI requires a cultural and philosophical shift from RtI as a gateway to a special education referral. Further, it requires a change in instructional strategies, data collection, and frequent progress monitoring as a component of the overall instructional process (Castro-Villareal, Rodriguez, & Moore, 2014). The perceptions of school staff, consequently, are a primary indicator of the successful implementation of an RtI process. Learner outcomes are directly correlated to the quality of instruction provided in the general education setting (Darling-Hamman, Wei, Andree, Richardson, & Orphanos, 2009; Sanders & Horn, 1998; Sanders & Rivers, 1996; Wenglinsky, 2000; Westbury, 1993). Substantial changes in classroom teachers'

perceptions of teaching and student learning are difficult to make and maintain (Desimone, Porter, Garet, Yoon, & Birman, 2002; Demings, 1998; Senge, et al., 2000; Supovitz, 2006). All organizations are products of the ways the members think and behave (Senge, et al., 2000). The ability of an organization to learn and adapt is critical to the long-term performance and success (Argote & Miron-Spektor, 2009). Learning takes place in multiple levels of an organization (Argote & Miron-Spektor, 2009; Schwandt & Marquardt, 2000; Senge, et al., 2000). However, meaningful systemic changes to an organization are a function of leadership (Bourdieu, 1989; Chizmar, 1994; Demings, 1998; Deshler & Cornett, 2012; Freire, 2006; Hallett, 2003; Senge, et al., 2000).

While teachers reported positive perceptions through the Likert scale survey questions, the *Low Inference Descriptors* do not indicate a strong correlation between the Likert scale scores and the responses to open-ended questions. Further analysis of the Low Inference Descriptors of the RtI effectiveness provide the researcher with the teachers' and counselors' perceptions regarding the Likert scale responses provided. Analysis of the Low Inference Descriptors reveals the RtI system as implemented is not an integrated component of the instructional program of the district. While some perceptions indicated there remains some confusion regarding the implementation of the RtI as a systemic process, a significant number of statements indicate the separation of the RtI process as a stand-alone process or program that does not regularly inform classroom instruction or instructional practices as indicated by the following summarized descriptors:

- RtI helps because the students experience instruction from other teacher's
- Teachers are not provided information regularly on the progress of students receiving interventions

- Interventions are not primarily based on teacher observations but on screening data
- Interventions may not be provided consistently due to intervention teachers' schedules
- Intervention teachers are unable to provide interventions for the first 6-weeks of the school year due to screening
- RtI cannot be easily provided in large classroom settings. Additional support is required
- Improved communication is needed between classroom teachers and interventionists

Significant research has been conducted to define best-practices for implementation of an RtI model. Research on organizational change processes and educational reform suggest that factors such as training, motivation, efficacy, resources, and acceptance of the change, philosophical and cultural changes all will impact the successful implementation of an RtI process (Castro-Villareal, et. Al., 2014; Reynolds & Shaywitz, 2009). The fidelity of the implementation of an RtI process is in large part dependent upon the efficacy of teachers and counselors within the RtI framework. Research from the perspective of organizational leadership will provide the field with additional insight into the fidelity of the RtI model.

Implications and Conclusions

Information from campus-based staff may provide insight to central office administration regarding improvement of the RtI processes, leading to improved learner outcomes. School staff implementing RtI in other districts may benefit from the information provided by this study. Further, information of staff perceptions may allow for the improvement of professional development plans to provide on-going support and assistance to districts regarding the fidelity of the implementation of an RtI process. The impact of NCLB and ESSA on educational practices focused on addressing the needs of struggling learners and to provide instruction to

remediate gaps in their learning to ensure academic success and the meeting of grade-level standards (U.S. Department of Education, 2004). Districts are responsible for the identification of struggling learners and the development of individually designed interventions to address academic and behavioral needs through the implementation of a multi-tiered support system. Last, this study may provide insight into the perceptions of staff members in different type school districts as defined by the Texas Education Agency.

Differences would be anticipated due to the size and proximity to major urban areas of the two districts utilized in the study. District A as a major suburban district shares district boundaries with a major urban district, and has an enrollment of 3% of the adjacent urban district or at a minimum 4,500 students. A Texas school district is classified as an other central city suburban school district if it is located in a county with a population between 10,000 and 949,999, it is contiguous to an other central city district, and the enrollment is greater than the district enrollment for the state of 879 students (Texas Education Agency, 2017). Recent research has examined the reinforcement of organizational culture in more urban districts as compared to more suburban school districts, and the shifting role of central office administrators away from regulatory oversight to increased instructional leadership (Honig & Rainey, 2014; Thompson & France, 2015). Thompson and France (2015) reported significant differences between the structures of school campuses and central office in urban school districts compared to suburban school districts. Specifically, district and campus leaders in suburban school districts participate in the same culture exhibited in neighborhood schools. Further, in suburban districts, there is less separation between central office and campus administration that the development and use of structures based in student data analysis are less relevant because of the collaborative nature of data analysis in suburban districts. As a result of their findings, urban school districts

would appear to have more substantial mechanisms for effecting district-wide change in organizational culture than suburban school districts.

Teachers and counselors work with struggling students in an effort to address academic and behavioral needs that will have a negative impact on post-secondary outcomes. Research has indicated that the use of a multi-tiered student support system using a problem solving model has positive outcomes for struggling learners in both academic and behavioral studies (Barnett, Daly III, Jones, & Lentz Jr, 2004; Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Glover & DiPenna, 2007; Hoover, 2011). Overall, teachers in this study understood the components of the RtI process, but stressed that the implementation seemed inconsistent and required more standardization. Further barriers identified to fidelity of implementation was the lack of time to address the student needs. School districts and campus administrators currently implementing an RtI process may provide time embedded in the school day for teachers to engage in the problem solving process. Additionally, school district currently implementing RtI could sustain and improve the RtI process by adhering to the recommendations of teachers and counselors, which were to: (a) ensure access to appropriate resources to meet the needs of struggling learners, (b) ensure systemic implementation of the process, and (c) provide time for teachers and counselors to engage in the RtI process.

A review of the findings of this study should reflect on the impact of the TEA-designated type of each school district. Larger school districts such as District A have more district-level guidance and mandated procedures than smaller school districts such as District X as research by Thompson and France indicated (2015). As a result, there is more impact of site-based decision-making in a smaller school district with less central office oversight of an initiative such as RtI

implementation. Therefore, more variance between campuses would be seen in a smaller district with less centralized and collaborative goal setting (Waters & Marzano, 2006).

Of benefit for central office administration include findings of the general understanding of the RtI program. Teachers in both District A and District X indicated in survey results that they had a strong understanding of the RtI process, the purpose, and the basic structure of the problem-solving process. Central office administrators in smaller school districts should consider the utilization of a professional learning community model for principals in an effort to develop consistent district-wide practices in RtI (Honig & Rainey, 2014; Farmer, 2017). Waters and Marzano (2006) research found a positive correlation between autonomous campus leadership functioning with district-defined parameters. Central office staff in smaller school districts should also consider more formal structures and supports provided to school campuses to increase consistency among campus implementation. Further, with increased pressure on campus administrators, district leaders need to engage in more leadership practices to maximize principal effectiveness through providing aligned practices across the district (Thompson & France, 2015).

The replication study allowed for identification of similarities and differences between the teachers' and counselors' perceptions of RtI implementation in a suburban Texas school district as compared to the teachers' and counselors' perceptions of RtI implementation in an other central city suburban Texas school district. The teachers and counselors who participated in the study represent a small sample of the number of teachers and counselors in district X, but their input will provide researchers and educators examples of challenges to consider when implementing the RtI process and recommendations to use to improve the process on K-8 school campuses.

In 2016, The Houston Chronicle published the first article in a series of articles regarding the identification of students with disabilities receiving services under the IDEA. The article entitled Denied: How Texas keeps tens of thousands of children out of special education (Rosenthal, 2016) was the first in a series of exposes alleging the role the Texas Education Agency played in using the state accountability system to pressure school districts to under identify students for special education services. In 2004 the Texas Education Agency Performance Based Monitoring Analysis System (PBMAS) identified performance measures for the overall rate of identification for students in special education. The target rate for the PBMAS system was set at 8.5% of total student enrollment. The punitive measures of the accountability system allegedly forced school districts to delay or deny identification and services to students with suspected disabilities in order to comply with the state accountability system target rate. According to Rosenthal (2016) teachers and administrators across the state of Texas reported that they were pressured to attempt to serve the needs of students with disabilities in alternative programs that would cost the state less to fund. Programs such as Section 504 of the Americans with Disabilities Act and various intervention programs replaced special education services due to the pressure placed on school districts by the state education agency. The purpose, according to Rosenthal, was to reduce the costs of educating students with disabilities so the state could save or recoup the funds not utilized to serve students with disabilities. While the average national identification rate for special education is near 13%, the state of Texas in 2015 finally met the state-wide goal identification rate of 8.5%. Rosenthal's article revealed that if Texas was serving students in special education at the national rate, and additional 250,000 students would receive special education and related services to meet the needs of disability related concerns.

The United States Department of Education (USDE) was made aware of the identification concerns in Texas in 2016. At that time, the USDE opened a state-wide investigation on the Texas Education Agency's policies to determine if the agency's policies and accountability system resulted in the denial or delay of timely evaluation, identification, and provision of special education and related services to students meeting the eligibility criteria specified in the federal regulations of the IDEA. A series of stakeholder meetings were held in five cities across the state of Texas for investigation purposes. In February of 2017, the USDE conducted on-site investigation visits to twelve Texas school districts to collect information to assist in determining if Texas violated federal law in the way it evaluated students for special education (TEA, 2017). Further, the USDE reviewed documents at the state and district levels related to the identification and evaluation of students with disabilities, and policies and procedures regarding RtI, provision of related aids and services under Section 504 of the Rehabilitation Act of 1973, and the Texas Dyslexia Program.

The U.S. Department of Education (USDE) via the Office of Special Education Programs (OSEP) issued a findings letter and report on January 11, 2018 to the state of Texas. The findings report issued three areas of non-compliance with federal law:

- The TEA did not ensure all school districts properly identified, located, and evaluated children with disabilities residing in Texas who were in need of special education and related services.
- The TEA failed to make a free appropriate public education (FAPE) available to all eligible children residing in the State.

- The TEA failed to fulfill its general supervisory and monitoring responsibilities by IDEA to ensure that Independent School Districts throughout the State properly implemented IDEA's child find and FAPE requirements (USDE, 2017).

Of significant concern in the OSEP investigation was the implementation of RtI due to the volume and severity of parent concerns about RtI processes being used to delay or deny evaluation under the IDEA (USDE, 2017). OSEP determined that school staff were not able to explain what level of progress would allow a student to stop receiving RtI interventions in a higher tier. Staff across various district were not able to articulate how students progressed across tiered interventions, how long students were served in each tier, or when children moved from one tier to another. Parents and teachers reported an understanding the children were required to complete three tiers of RtI before a referral to special education could be considered. Children not making adequate progress were allowed to continue in RtI for an unreasonable amount of time prior to a referral to special education. The OSEP found that the implementation of RtI in Texas was inconsistent with the IDEA requirements. The overall lack of clarity demonstrated by school personnel was found to be a cause of delayed evaluation for special education.

While Section 504 is not specifically under the purview of the OSEP, during on-site investigation visits the USDE made inquiries into the implementation for Section 504 as it pertained to delaying or denying referrals to special education. The OSEP report identified a significant increase in students served through Section 504 since the inception of the 8.5% special education identification standard. From 2004 to 2012 the numbers of students served through Section 504 increased from 55,434 to 132,078, leading OSEP to question the balance between Section 504 and IDEA. The monitoring report revealed that interviews with school staff

across the state revealed a lack of understanding of when a student in Section 504 might be referred to special education. Some school districts are providing related services under Section 504 that have previously been provided through the IDEA. Also indicated in the report was a finding that parents did not understand the differences between Section 504 and the IDEA (USDE, 2017).

The State of Texas has separated dyslexia identification and services from special education although dyslexia could qualify a student with a specific learning disability under the IDEA. The OSEP report identified several concerns with the Texas Dyslexia Program and the guidance from the Texas Dyslexia handbook. Concerns included a requirement for identification of another potential disability is required for referral for dyslexia evaluation which is in contradiction to the IDEA. The OSEP reported that there are inconsistent practices in dyslexia across the state, a lack of understanding of when a student with dyslexia would require special education or Section 504, and multiple school districts reported that if dyslexia is a concern the students are not considered for special education evaluation. The dyslexia program as designed and implemented in Texas was identified as a potential barrier for locating, evaluating, and identifying children with disabilities who require special education and related services (USDE, 2017).

The State of Texas has drafted a corrective action plan (CAP) that was published for public comment on January 23, 2018. In the corrective action plan, it is evident that the TEA is addressing the interplay between what have previously been regarded as discrete and separate programs for RtI, Dyslexia, Section 504, and Special Education. Public school districts in Texas have maintained a separation of functions for these specific programs. While the CAP specifically applies to special education three of the four programs included in the corrective

action are under the management of general education. Although much of the CAP is out of the control of special education, there are potentially significant fiscal impact to school districts for special education non-compliance based on the management of these general education initiatives (TEA, 2018). As a result of this CAP and possible impact on school district management, there are significant policy areas that need to be addressed at both the state and the local levels.

Statewide Policy Concerns

Texas has not provided guidance to independent school districts regarding the implementation of RtI. A review of the Texas Education Agency website reveals minimal information regarding RtI, and no information or guidance on implementation of a program. Recent changes in notification requirements are identified on the TEA website, and the website offers sample letters for school districts to utilize to notify parents of their student's participation in intervention activities. This requirements was passed in the 85th Texas Legislature in 2017. Prior to the 2017-2018 school year, although parent notification has been identified as a best practice by practitioners there has been no requirement or expectation set for school districts regarding parent notification (Barnett, Daly III, Jones, & Lentz Jr, 2004; Berkeley, Bender, Peaster, & Saunders, 2009; Fuchs & Fuchs, 2006; Glover & DiPenna, 2007; Hoover, 2011; Ogonosky, 2008).

The initial foray of the Texas State Legislature into the realm of RtI occurred during the Texas 77th Legislative session in 2000, when the Texas Behavior Support Initiative (TBSI) was passed as Senate Bill 1196. Initially, the TBSI primarily focused on the prohibition of the use of confinement, restraint, seclusion, and time out for students served by special education in the public school setting. The state of Texas did set expectations through the TBSI for a system of

positive behavioral supports and interventions (PBIS) to be implemented in the public school systems. TEA provided guidance in 2010 through the Commissioner's Rules as specified in 19 Texas Administrative Code (TAC) Chapter 89. This state statute encourages schools to utilize an RtI process in evaluating student behavior related to a suspected emotional disturbance. Little guidance has been provided by the TEA requiring school districts to independently research ways to implement RtI in an effort to be compliant with the state regulations. Further, no funding was allocated to the implementation of TBSI or PBIS. The initiative did, however, include a training requirement for educators regarding behavior and the use of appropriate interventions.

State Guidance and Procedures for RtI

Amid a lack of direction, guidance, or financial support from the State of Texas, school districts now are to be held responsible for the federal concerns regarding the implementation of RtI and how students are evaluated and identified as having a disability through Dyslexia, Section 504, or Special Education programs (TEA, 2018). As the Texas Legislature is required to reconvene in 2018 the TEA should address policy issues relating to the CAP during this legislative session. First, there is a significant potential impact to special education programs across the state due to the way the CAP has been devised and developed. Special education programs are the recipients of general education support structures of RtI, Dyslexia, and Section 504 programs. Special education programs do not control the outcomes of these general education initiatives. As a result, the fiscal penalties are focused on special education for failure to identify. However, special education can only evaluate after a referral has been made by the general education program. The state can easily address the concerns related to timely evaluation identified in the OSEP letter by providing school districts with clear guidelines, expectations, and definitions of academic and behavioral RtI.

Revision of the Texas Dyslexia Handbook

Further, the OSEP letter outlines concerns that students are served in Dyslexia programming or Section 504 without an evaluation for special education. In Texas, dyslexia services are a general education function with specific guidelines outlined in the State-provided Dyslexia Handbook, the most recent version revised in 2014. The State has developed clear procedures regarding dyslexia which include access to a three year structured research-based intervention designed to meet the needs of students with dyslexia. The letter from OSEP contradicts the Dyslexia Handbook. The Dyslexia Handbook needs to be revised to address the concerns regarding special education assessment.

Administrative Preparation Program Revision

Referral to special education has always been a local decision, typically campus-based in conjunction with the parent. The campus principal is responsible for the implementation of all programs on the campus, including special education on the campus. The process for Child Find and the ultimate provision of FAPE to a student with a disability remains the responsibility of the campus principal regardless of the level of knowledge the principal has regarding special education (Lynch, 2012; Roberts & Guerra, Jr., 2017; Wakeman, et.al., 2016). Principal preparation programs do not provide principals with the knowledge to effectively supervise regular and special education programs (Campbell-Whatley & Lyons, 2013; Roberts & Guerra, Jr., 2017). Principals participating in a Texas-based study in 2017 requested additional training in Section 504 the Americans with Disabilities Act (ADA), and RtI programs and implementation (Roberts & Guerra, Jr., 2017). At the state level, principal pre-service education and certification requirements need to be reviewed and revised to address the concerns outlined by OSEP and the USDE regarding the education of students with suspected disabilities in Texas (OSEP, 2017).

Special Education Teacher Preparation Programs

The political impact of federal legislation on special education teacher preparation programs has been significant since the passage of NCLB (Shepherd, et.al., 2016). The role of special education teachers has shifted from self-contained models to a more collaborative instructional model. Special education teachers are required to be highly qualified, with special education as an additional area of study. Implications of the NCLB highly qualified requirements include a decrease of qualified special education teachers graduating from teacher preparation programs (Sorrentino & Zirkel, 2004). The role of special education teachers has required an increasingly consultative and collaborative role with general education (Fuchs & Stecker, 2010). However, with the decrease of special education pre-service knowledge it is increasingly difficult for special education teachers to effectively navigate their new roles. At the state-level, special education teacher pre-service education and certification requirements need to be reviewed and revised to address concerns regarding the qualifications of special education teachers to understand and address the impact of disabilities on instruction.

Fiscal Implications

The Houston Chronicle articles and other newspaper sources have cited the State of Texas placed the 8.5% special education identification rate cap in an effort to reduce the financial costs to the state for the education of students with disabilities (Rosenthal, 2016; Strauss, 2017; Swaby, 2018). Of significant impact to school districts is the increased cost of providing special education as a result of the CAP. School districts are required to review all students receiving interventions, dyslexia instruction, or Section 504 services for 6 months to determine if an evaluation was warranted, conduct an evaluation, provide services, and provide compensatory services if the student was not identified in a timely manner. School district

expenditures for evaluations and evaluation staff is likely to increase. Compensatory services have an inherent cost in and of themselves if the district and the parent agree on the services. Districts also may be subject to TEA complaints or due process through the CAP activities. Further, the CAP specifies that districts may be required to participate in an escalated TEA oversight process with the possibility of requiring districts to hire third-party technical assistance providers with unspecified parameters or costs to the districts. The CAP does not address any concerns regarding these potential fiscal concerns. To address the OSEP concerns, the TEA has increased statewide special education support staff at the state level by 39 employees. The CAP specifies the hiring of an additional 44 TEA staff members at an annual cost of 3.6 million dollars to increase state monitoring of special education processes, procedures, and compliance (TEA, 2018). While increased funding is requested at the state level, no additional funding is requested at the local district level, leaving local districts fiscally responsible for implementing state policies regarding identification rates.

Local Staffing and Financial Implications

Local school district administration and Boards of Trustees must understand the potential fiscal impact on the school district as financial planning is undertaken for the 2018-2019 school year. A national study of the expense school districts incur related to special education due process revealed the following:

- the average legal fees for districts involved in a due process hearing were \$10,512.50;
- districts were required to compensate parents for attorney fees averaged \$19,241.38;
- the expenditures associated with the verdict averaged \$15,924.14; and
- districts that settled with a parent prior to hearing incurred settlement costs on an average of \$23,827.34 (Pudelski, 2016).

As the TEA CAP does not specify any relief for districts related to due process, local school districts may be fiscally responsible for the expense of due process proceedings with parents. Further, as the CAP does not recommend additional funding for local school districts to address special education if the Texas State Legislature addresses local funding it will not be as a recommendation by the TEA. While the state has identified training in special education as a corrective action, the plan also identifies each district is responsible for providing parent training and community training regarding RtI, dyslexia, Section 504, and special education. The requirements for these trainings are to be determined.

Campus Supports

Principal supports must be designed that allow principals to receive the technical support required to provide services to all students while meeting the requirements for identification of disabilities. Collaborative frameworks for RtI, dyslexia, Section 504, and special education need to be developed, implemented, and supported by district-level staff. Increased campus support is recommended to provide direct coaching support to campus staff. While this has fiscal impact, it also has organizational and leadership impacts placing district level administrative staff in a position to impact instruction on the campus as opposed to providing regulation guidance to campus administration. . Further, special education teachers graduating since NCLB highly qualified requirements have impacted special education pre-service training, there is a lack of knowledge regarding special education and disabilities in the educational setting. Additionally, general education teachers do not have a strong background in understanding the increasingly collaborative role of the special education teacher. Instructional coaching to provide technical support to special and general educators is recommended to meet the needs of students with disabilities.

Community Outreach

While the state CAP requires parent training, this is an opportunity to create a more collaborative partnership with parents and the community to understand the various support services provided to struggling students including students with disabilities. The IDEA has always included parent participation in the educational process of students with disabilities (Yell, Rogers, & Rogers, 1989). While barriers have been identified to the participation of parents of struggling learners in schools, the positive impact has been established when parents are involved in educational planning (Burke & Sandman, 2015). In an effort to reach parents of students served across various programs, the required trainings can have a positive outcome for school districts. District staff knowledgeable about RtI, Dyslexia, Section 504, and special education all need to be present to provide the community and parents opportunities to ask information. Further, opportunities for parent involvement should also be explored by district administrative staff.

Significant Disproportionate Representation in Special Education

Disproportionate representation in special education has been an area of research for a number of years. Studies regarding disproportionate representation include misrepresentation in various groups including but not limited to:

- linguistic (Cartledge, Kea, Thorius & Sullivan, 2013; Watson, & Oif, 2016; Cartledge, Kea, Watson, & Oif, 2016; Harris-Murri, King, & Rostenberg, 2006);
- cultural (Drame & Yu, 2008; Harry & Klingner, 2007; Klingner & Edwards, 2006); and
- race and ethnicity (Attilie, Bal, & Thorius, 2010; Drame & Xu, 2008; Graves & Mitchell, 2011; Valencia, 2010)

In 2016, the U.S. Department of Education proposed compliance data collecting and reporting on significant disproportionality in special education identification, least restrictive environment, and disciplinary placements (USDE, 2016). The USDE has defined 7 race/ethnicity categories to utilize in determining significantly disproportionate representation in 6 special education eligibility categories as indicated in Table 31 below.

Table 31

Representation Disability and Race/Ethnicity

Representation Disability	Race/Ethnicity Areas
1. Autism	1. Hispanic/Latino
2. Emotional Disturbance	2. American Indian or Alaska Native
3. Other health Impairment	3. Asian
4. Intellectual Disability	4. Black or African American
5. Speech Impairment	5. Native Hawaiian or Other Pacific Islander
6. Specific Learning Disability	6. White
	7. Two or More Races

The federal accountability requirements require analysis of the potentially disproportionate representation of these seven race and ethnicity areas as compared to enrollment percentages in the school district’s overall student population in areas of disability, instructional setting, and disciplinary placements (USDE, 2016). As a result of these regulations, special education accountability has been required to add 97 additional indicators to performance reporting to meet federal requirements.

Impacting all of these indicators remains the RtI process. Special education is the recipient of practices that may result in ethnically or racially disproportionate referrals resulting in a disproportionate identification in special education. Further, behavioral supports and PBIS are components of an overall RtI process within the school system. While special education is

held responsible for the end results of instructional practices, special education programs have minimal influence over the overall curriculum and instructional systems in school districts.

The State of Texas has provided minimal supports to a state-wide model and implementation of RtI. As a result, school districts are required to identify and implement research practices with little support and no financial resources allocated specifically for the RtI process. This lack of support has resulted in a state-wide RtI program that varies across the nearly 1200 school districts and charter schools located in the state of Texas.

Of additional concern as the Director of Student Support Services are the disproportionate representation of racial and ethnic referrals for special education evaluations.

Table 32

Referral to Special Education by Ethnicity/Race

Racial/Ethnicity	Overall Student Enrollment*	Referral to Special Education**
Black/African American	1.1%	6.0%
Hispanic	19.9%	27.5%
White	75.5%	50.5%

*District enrollment percentages from the 2016-2017 Texas Academic Profile Report (TAPR)

** Special education referral numbers as of May 19, 2018

Table 33

Graduates by Ethnicity

Race/Ethnicity	Overall Student Enrollment*	Graduation Rate by Group**
African American/Black	1.1%	1.2%
Hispanic	19.9%	13.1%
White	75.5%	82.1%

*District enrollment percentages from the 2016-2017 Texas Academic Profile Report (TAPR)

** Special education referral numbers as of May 19, 2018

In a district where over 90% of instructional staff are white these numbers are indicative of additional program concerns that need to be addressed. In 1995 Lisa Delpit's book *Other People's Children: Cultural Conflict in the Classroom* was published. I became familiar with this book as a graduate student. While this research study was not based in critical theory, RtI may benefit from a critical analysis. Is RtI truly meeting the needs of struggling students or is RtI a way to improve the academic outcomes of children of privilege, while further allowing the reduction of educational outcomes for children of color. Is there a perceived benefit for students to not be identified with a disability that impacts the number of referrals for white students? How would this data compare to a district with a more diverse teaching staff? Obviously from the focus of the federal government to the locally collected data in my district of study, there continues to be both controversy the perseverance of deficit beliefs of groups of children.

Recommendations for Further Research

Successful RtI implementation will require more research to continually improve the process, the interventions, and to ensure treatment fidelity of the interventions during each tier. Additionally, with significant policy implications due to the federal investigation of Texas special education identification processes the importance of RtI implementation in the identification of suspected disabilities requires additional research in other areas. Therefore, the findings in this study concluded that more research was needed in the following areas:

1. Implementation from the perspective of campus leadership or support personnel such as administrators, special education assessment staff, and central office administration.
2. Application of organizational theory to educational design to develop a cohesive

instructional model that embeds RtI processes and programs for all special student populations into the overall curriculum and instruction of a school district.

3. How effectively has RtI implementation been with various student populations in school districts that have implemented RtI for a number of years.

4. Perceptions of teachers, parents, and administrators of the continuum of support services for struggling students after an on-going coaching model has been provided to implement a multi-tiered support system (MTSS).

5. The culturally and linguistically responsiveness of the RtI process for English language learners.

6. The impact of district leadership responsibilities as defined by Waters and Marzano (2006) and student achievement in relation to an RtI model to support struggling learners.

7. The efficacy of pre-services programs for teachers and administration to provide programs designed to identify and meet the needs of students with disabilities.

8. Is there a correlation between the length and quality of RtI and graduation/postsecondary outcomes for students of different races and ethnicities?

Summary

This chapter summarized and discussed my research findings about the implementation of RtI from teachers' and counselor's perspectives for each of the four research questions. The discussion was aligned to a three-tiered RtI model within a problem-solving framework as the theoretical frame and the literature review. The possible implications and conclusions were identified and acknowledged according to the findings. Lastly, recommendations for future research were stated based on the overall study conclusions.

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APPENDIX A

1. At my school the principal strongly supports Response to Intervention (RTI) as a model for identifying educational disabilities.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. The RTI team on my campus has members with a high degree of credibility among other staff members.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 3. At my school the staff understands RTI and the purpose of research-based interventions.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. At my school staff (95% or more) understand the RTI model, believing that it benefits teachers as well as students.

	Strongly Disagree	Disagree	Agree	Strongly Agree
Select response rating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. At my school there are three clearly defined Tiers of intervention that all staff understand.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 6. My school's Intervention Team creates an atmosphere in which the referring teacher feels welcome and supported.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. My school's Intervention Team follows a formal problem-solving process.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. My school's Intervention Team collects background information/baseline data on the student to be used at the initial Intervention Team meeting.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. My school's intervention Team selects methods of assessment (e.g. TPRI, Curriculum-Based Measurement, DIBELS, Star-Renaissance) to track student progress at least weekly during intervention.

Strongly Disagree Disagree Agree Strongly Agree

10. My school's Intervention Team documents the quality of the referring teacher's efforts in implementing the intervention.

Strongly Disagree Disagree Agree Strongly Agree

11. My school's Intervention Team holds follow-up meetings with the referring teacher to review student progress and judge whether the intervention was effective.

Strongly Disagree Disagree Agree Strongly Agree

12. The RtI team on my campus has members with a high degree of credibility among other staff members.

Strongly Disagree Disagree Agree Strongly Agree

Next

13. The RtI team utilizes a problem-solving model during meetings.

Strongly Disagree Disagree Agree Strongly Agree

14. The RtI team collects and analyzes background information/baseline data on the student.

Strongly Disagree Disagree Agree Strongly Agree

15. The RtI team on my campus has strong knowledge of available resources school-wide that can be used for interventions.

Strongly Disagree Disagree Agree Strongly Agree

16. The RtI team has a strong knowledge of how to specifically target interventions to meet the student needs, or to adjust interventions based on data.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. The RtI team selects academic and behavioral interventions that are scientifically based.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. The RtI team sets clear, objective, and measurable goals for student progress.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. My school has put together a library of effective, research-based intervention ideas for common student referral concerns such as poor reading fluency, speech, and defiant behavior.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. My school considers the likely root cause of the student's academic and/or behavioral difficulties (e.g. skill deficit, lack of motivation) and chooses intervention strategies that logically address those root causes.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. My school tailors intervention ideas as needed to be usable in real-world classrooms while being careful to preserve the treatment qualities that make each intervention effective.

Strongly Disagree	Disagree	Agree	Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

22. My school formats intervention strategies as step-by-step teacher friendly "scripts" containing enough detail so that educators can easily understand how to put them into practice.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

23. My school can conduct structured classroom observations of students to determine rates of on-task behavior, academic engagement, work completion, and rates of positive or negative interactions with adults.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

24. My school can collect and assess student work products to assess the completeness and accuracy of the work and to estimate the student time required to produce work.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

25. My school can administer and score curriculum-based measurement (CBM) probes in basic skill areas: phonemic awareness, reading fluency, math computation, and writing.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. My school can use local or research norms (e.g. CBM) or criterion-based benchmarks (e.g. DIBELS) to judge the magnitude of the student's delay in basic academic skills.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

27. My school can create Daily Behavior Report Cards (DBRCs) or other customized ratings forms to allow the instructor to evaluate key student academic and general behaviors on a daily basis.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

28. My school can convert progress monitoring data into visual displays such as time-series graphs to aid in instructional and behavioral decision-making.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. My school can regularly share charted or graphed information with students, teachers, parents, or administrators as feedback about the effectiveness of the intervention.

Strongly Disagree	Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30. What, if any, challenges have you faced while implementing RtI within the problem-solving team with your students and how have you overcome these challenges?

31. What recommendations do you believe will improve the RtI process on your campus to better assist struggling students academically and/or behaviorally?

32. Do you feel the RtI strategies have effectively assisted struggling students academically and/or behaviorally? If yes, in what way? If not, why not?

33. Do you have any additional comments or concerns about RtI that you would like to contribute that were not addressed in this survey?

Prev

Done