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RESPONSE TO INSTRUCTION AND INTERVENTION:  
TEACHERS' PERCEPTIONS OF THE IMPLEMENTATION  
IN THE BEAUMONT UNIFIED SCHOOL DISTRICT  
AS MEASURED BY THE CONCERNED BASED ADOPTION MODEL

A dissertation submitted in partial satisfaction  
of the requirements for the degree of  
Doctor of Education  
in Educational Leadership, Administration, and Policy

by

Rebecca M. Salato

April, 2012

Susan Parks, Ed.D. – Dissertation Chairperson

This dissertation, written by

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under the guidance of a Faculty Committee and approved by its members, has been submitted to and accepted by the Graduate Faculty in partial fulfillment of the requirements for the degree of

DOCTOR OF EDUCATION

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## ABSTRACT

A school district in southern California mandated the implementation of Response to Intervention (RtI) in order to better meet the needs of all district students. RtI is a proven approach to ameliorating academic and behavioral difficulties. It provides a logical structure for allocating instructional resources to utilize research-based effective instructional practices, identify students with learning disabilities, and collaborate between general and special education to benefit all students. In order to continue to provide effective professional development for teachers and thus improve the chances of successful implementation, district administrators needed feedback about the process of implementation and concerns of teachers. The purpose of this program evaluation study was to identify the perceptions, concerns, and level of acceptance of teachers toward the implementation of RtI, in order to provide more effective professional development in the future. A survey was used to understanding the impact of this potentially significant change by measuring the user group's overall perception and level of acceptance. The survey used was the Stages of Concern (SoC) survey from the Concerns Based Adoption Model (CBAM). This study was designed to investigate the following: (a) the composite Stages of Concern Questionnaire (SoCQ) profile of teachers in regard to the overall perceptions and level of acceptance by the users in the implementation of RtI; (b) the overall perceptions and level of acceptance of teachers in regard to the implementation of RtI related to selected demographic characteristics of the employees, with respect to job location (elementary site or secondary site); (c) other issues or concerns seen as significant to the teachers, as determined by the responses to the open-ended questions (see Appendix A and Appendix B). Teachers' perceptions of changes taking place play a

critical role in RtI implementation and its impact on student success. Considering this, understanding the impact of such potentially significant change by measuring teachers' overall perception and level of acceptance could be a key component in providing guidance for future implementations. This understanding can also facilitate the development of appropriate professional development to enhance the acceptance and implementation of RtI.

## Chapter 1: Introduction

Too often, the struggles of the African American student, the English language learner, and the learning disabled student, have been hidden by overall school achievement gains. According to O'Connell, that day is past; now we are holding ourselves accountable for the results of all children (California School Boards Association, 2007). When we see significant groups of students falling far short of the goal of proficiency that we hold for all students, we must act. Today, equipped with specific knowledge of these gaps, we must focus as never before on solutions.

In the spirit of O'Connell's assertion (California School Boards Association, 2007), many education policymakers have proclaimed similar views as well as policies designed to improve students' educational achievement by holding schools accountable for student performance, including the State Superintendent of Public Instruction, the No Child Left Behind Act of 2001 (NCLB), and the Individuals with Disabilities Education Improvement Act of 2004 (IDEA). All public schools are required to identify and provide instructional interventions for students who are at risk for academic failure as defined by both laws (IDEA, 2004; NCLB, 2001). Response to Intervention (RtI) is a model approach to meeting the requirements of these laws. RtI is a multi-tier approach to the early identification and support of students with specific learning and behavior needs. The RtI process begins with high-quality instruction and universal screening of all children in the general education classroom. Struggling learners are provided with interventions at increasing levels of intensity to accelerate their rate of learning. These services may be provided by a variety of personnel, including general education teachers, special education teachers, and specialists. Progress is closely monitored to assess both

the learning rate and level of performance of individual students. Educational decisions about the intensity and duration of interventions are based on individual student response to instruction. RtI is designed for use when making instructional decisions in both general education and special education, creating a well-integrated system of instruction, and intervention guided by student outcome data. California State Superintendent of Public Instruction Jack O'Connell stated, real and measurable progress has been made since the institution of standards-based education. But, while improvement in our schools has been nearly universal, our across-the-board success has still failed to close an achievement gap that threatens the future of our diverse state. Recognizing this is important. Addressing it is imperative (California School Boards Association, 2007).

RtI is emerging nationally as an effective strategy to support every student. The California Department of Education (CDE) is squaring the term RtI to create the term *Response to Instruction and Intervention* (RtI<sup>2</sup>) to define a general education approach of high quality instruction, early intervention and prevention, and behavioral strategies. It is a process that utilizes all resources in a school and district in a collaborative manner to create a single, well-integrated system of instruction and interventions informed by student outcome data. RtI<sup>2</sup> is fully aligned with the research on the effectiveness of early intervention and the recommendations of the California P-16 Council (California Department of Education, 2011). Access, culture and climate, expectations, and strategies are the council's themes.

### **Problem Statement**

Identifying struggling students is not a difficulty for teachers; knowing what to do next, as intervention, is the hard part. It is difficult for teachers to offer intensive

instruction for students who need extra help, while managing the needs of all their students. This directly leads to the need for good training on the implementation of Response to Intervention (RtI).

The Beaumont Unified School District (BUSD) mandated the implementation of RtI in order to better meet the needs of all district students. The district administration, therefore, had a vested interest in the implementation of RtI. To improve the chances of successful implementation, ongoing training, and professional development needed to accompany the implementation. In order to continue to provide professional development for our teachers, the district needs to know exactly where they are in the process of implementation, what their concerns are, and what they need in future training. Based on the Concerns-Based Adoption Model (CBAM) research conducted at the Research and Development Center for Teacher Education (RDCTE) at the University of Texas at Austin (Hall, Wallace, & Dossett, 1973), the teachers of Beaumont Unified School District (BUSD) were anticipated to have various concerns about the implementation of RtI and its associated professional development. These concerns are expected to be different for each individual, based on that individual's experience, attitude, and perceptions. Individual concerns are then coded and used as group data to inform the district of its needs for professional development. This professional development is based on the users' knowledge of and concerns about the implementation of Response to Intervention.

The concerns of the BUSD teachers and administrators in regards to the implementation of RtI and the professional development associated with it have not been formally identified. Two years into the implementation of RtI, the district administration

was not sure how effective the implementation of RtI had been. The Stages of Concern (SoC) component of the Concerns-Based Adoption Model (CBAM) provides an appropriate method for identifying teachers concerns (Hall et al., 1973).

Therefore, the problem was to identify the users' perceptions, levels of acceptance, and satisfaction during the implementation of RtI in the Beaumont Unified school district, a K-12 district in southern California, as measured by the Stages of Concern Questionnaire (SoCQ) from the Concerns-Based Adoption Model (CBAM), designed to assess individual attitudes toward the preparation and training provided to teachers.

### **The District**

Beaumont Unified School district is a k-12 district located in the scenic mountain pass area, approximately thirty miles west of Palm Springs. The district has approximately 8000 students. There are six elementary schools, two middle schools, one comprehensive high school and a continuation high school. The district operates on a traditional schedule. Approximately 30% of the students in the district are English Learners (EL), and about 11% are identified for Special Education Services.

The district is very traditional. Most teachers are residents of the city, and many are long-term residents and graduates of Beaumont High School. The community of Beaumont is known as community with a traditional small town feeling. The community underwent fast growth over the past five years, as developers built large, affordable family homes that were relatively inexpensive. This also increased the district population, and several new schools were opened. With this growth, came an influence of both new teachers and parents from larger cities, with different views of education.



Many of the new families continued to work in larger cities, commuting as a trade-off for the new homes. The school district now had a need for afterschool programs to help support the commuting parents. Teachers also began seeing a wider gap in ability levels of students, partially based on missing school, and partially due to early schooling in more urban school districts, with more diverse needs.

Although the district was not yet in program improvement status, the gap between some student subgroups was steadily increasing. Teachers, and administrators believed the district was doing well, yet many students were still not meeting proficiency. District administration saw this as a serious problem, needing immediate attention, teachers, and some site administrators did not see the urgency to change instructional practices. Many believed that most students were doing the best they could, and didn't believe some of the other students, wanted to do better or had the ability to do better. This sin itself was the cause of the problem.

The district began to look at Response to Intervention models, as a way to support all students in the district. Administrators and key teacher leaders went to training and conferences to develop a district approach to RtI.

### **Purpose**

The purpose of this study was to identify the perceptions, concerns, and level of acceptance of teachers in BUSD toward the implementation of RtI, in order to provide more effective professional development in the future.

## **Research Questions**

This research study was designed to investigate the following questions:

- Question 1: What is the composite Stages of Concern Questionnaire (SoCQ) profile of BUSD teachers in regard to the overall perceptions and level of acceptance by the user in the implementation of RtI as measured by the SoCQ from CBAM?
- Question 2: What are the overall perceptions and level of acceptance of BUSD teachers in regard to the implementation of RtI related to selected demographic characteristics of the employees, as measured by the SoCQ from CBAM, with respect to job location (elementary site or secondary site).
- Question 3: What other issues or concerns are seen as significant to the BUSD teachers, as determined by the responses to the open-ended question section of the SoCQ from CBAM?

## **Importance of the Study**

The importance of this study encompasses the impact of the implementation of an innovative model, Response to Intervention (RtI), with the various associated people, processes, and systems within the district, as well as the overarching academic success of all students in California. It is imperative that a way to close the achievement gap for students in California is found. With the appropriate implementation of RtI, this may become a reality for our students in California. Understanding the impact of such potentially significant change by measuring a user group's overall perception and level of acceptance of RtI could be a key component in providing guidance for future professional development and implementations in similar school districts.

### **Delimitations of the Study**

The study has the following delimitations:

1. The population of this study was delimited to the teachers of one district in southern California.
2. A purposeful sample of educators was selected for the survey responses.
3. The survey distribution was delimited to a single time period for obtaining responses.
4. The SoC questionnaire of the CBAM was the only survey component used in this study.

### **Limitations of the Study**

The study has the following limitations:

1. Participation in the study was voluntary and therefore it was limited to BUSD educators that consent to participate
2. The survey was distributed one time and gathered in a specific time period, therefore, responses were restricted to only those received within the time period.
3. The findings of this survey were specific to the Beaumont Unified School District and will not be able to generalize to other school districts.

### **Assumptions**

The study was based on the following assumptions:

1. It was assumed that the responses to the survey were valid since the respondents were employees of the district during the implementation and during the study.

2. It was assumed that district support of the survey and the relationship of the researcher to the district did not interfere with the honesty or candor of individual's responses.

### **Definition of Terms**

- Adequate Yearly Progress (AYP): A nationwide accountability measure mandated by the No Child Left Behind Act of 2001 (NCLB). It requires each state to ensure that all schools and districts make adequate yearly progress as defined by states and as approved by the U.S. Department of Education.
- Concerns: The composite representation of feelings, the preoccupation, thought, and consideration that is given to a particular task (George, Hall, & Rutherford, 1979).
- Concerns-based adoption model (CBAM): This is an empirically-based conceptual framework that outlines the development process that individuals experience as they implement a new innovation and participate in attendant staff development (Hord & Huling-Austin, 1986).
- Curriculum-based measurement (CBM): An approach to measurement that is used to screen students or to monitor student progress in mathematics, reading, writing, and spelling (Deno, Fuchs, Marston, & Shinn, 2001).
- Differentiated instruction: Differentiated instruction refers to educators tailoring the curriculum, teaching environments, and practices to create appropriately different learning experiences for students in order to meet each student's needs (Brown-Chidsey & Steege, 2005).

- Early intervening services: The preventative components of NCLB and the IDEA of 2004. They are implemented to benefit students who manifest risk for poor learning outcomes but have not been identified as needing special education or related services (IDEIA, 2004).
- Evidence-based practice: Educational practices and instructional services that are supported by scientific research (Gersten & Domino, 2006).
- Fidelity of implementation: Accurate and consistent provision or delivery of instruction in the manner in which it was designed or prescribed according to research findings or developers' specifications (Hord & Huling-Austin, 1986).
- Formative assessment: A form of evaluation used to plan instruction in a recursive way (Marzano, 2003).
- Individuals with Disabilities Education Improvement Act: Originally passed in 1975 with the latest reauthorization in 2004. It is a federal statute related to providing a free, appropriate, public education and early intervening services to students with disabilities from birth to age 21 (IDEA, 2004).
- Implementation: This is the process of putting into practice a new idea, set of activities, or program (Hord & Huling-Austin, 1986).
- Inclusion: This is a service delivery model where students with identified disabilities are educated with general education peers the same age or grade-level (Korvaleski, Tucker, & Stevens, 1996).
- Intensive intervention: Intensive academic or behavioral interventions are characterized by their increased focus for students who fail to respond to less intensive forms of instruction. Intensity can be increased through many

dimensions including length, frequency, and duration of implementation. Within RtI, intensive intervention is usually referred to as Tier 3 (Brown-Chidsey & Steege, 2005).

- **Intervention:** This term means change in the instruction that a student receives in order to improve academic or behavioral performance. An intervention must have a set length of time and must be measurable (Marzano, 2003).
- **Levels of use (LoU):** LoU is one of the diagnostic dimensions of CBAM, used to describe the behavior of individuals as they become more familiar with and more skilled with the innovation; each of the eight identified levels describes behavior that is “characteristic of the innovation user at that particular stage of development” (Loucks, Newlove, & Hall, 1998, p. 5).
- **No Child Left Behind (NCLB):** The federal legislation signed by President George W. Bush that enforces accountability, provides more choices for parents, provides for greater local control and flexibility, and places an emphasis on scientifically based educational reforms.
- **Progress monitoring:** Used to assess students’ academic performance, to quantify a student rate of improvement or responsiveness to instruction, and to evaluate the effectiveness of instruction. Progress monitoring can be implemented with individual students or an entire class (Marzano, 2003)
- **Stages of concern (SoC):** This is another diagnostic dimension of CBAM. The composite representation of feelings, preoccupations, thoughts, and considerations given to a particular task is called a concern. Depending on an individual’s make-up, knowledge, and experiences, each person perceives and mentally contends

with a given issue differently; thus there are different concerns. Different stages of concern about the innovation have been identified. It appears there is a developmental movement through these stages; that is, certain types of concern will be more intense, then less intense, before arousal of other types will occur (Hall, Dirksen, & George, 2006).

- Universal screening: Conducted usually as a first stage within a screening, to identify or predict students who may be at risk for poor learning outcomes (Brown-Chedsey & Steege, 2005).

### **Organization of the Study**

Chapter 1 is an introduction to the study. This chapter includes background information, the purpose of the study, the research questions, and the importance of the study. The delimitations and limitations of the study, as well as the assumptions and definitions of key terms, are in this chapter. Chapter 2 is an extensive review of the literature on topics related to this study. The chapter begins with a definition of RtI. It further reviews the legal aspects of RtI and its evolution. The chapter discusses the components of RtI and the district roles that change with its implementation. The chapter describes California's implementation of RtI<sup>2</sup>, BUSD implementation, and background on CBAM. Chapter 3 describes the design of the study, instrumentation used, selection of respondents, data collection procedures, and data analysis techniques. Chapter 4 contains the general report of the findings and a chapter summary of the findings. Chapter 5 is a discussion of the major findings of the study and provides specific conclusions and recommendations.

## Chapter 2: Literature Review

### Introduction: Defining Response to Intervention

Response to Intervention is a way of thinking about student learning and the organization of resources at a school site and district to ensure that all students can and will learn. RtI is a proven approach to ameliorating academic and behavioral difficulties that has shown impressive results (Brown-Chidsey & Steege, 2005). It is a logical structure for allocating instructional resources efficiently and effectively to target the specific needs of all students. It is a commitment to use the best findings from current and emerging resources on effective instructional practices. It is a commitment to use a research-based decision making framework to address individual students, according to Brown-Chidsey and Steege. RtI is not simply a method for identifying students with learning disabilities; it is more than that. It is about improving results for all students. The collaboration between general and special education is one of RtI's greatest strengths, and at the same time one of its biggest challenges (Kovaleski, Tucker, & Stevens, 1996).

Response to intervention is based on the following core principles:

1. RtI practices are founded on the belief and core principal that all children can learn and that we are all responsible for the education of all students.
2. The next core belief is to intervene early; do not wait until students fail to provide needed services.
3. Next is a multi-tiered service delivery model. In RtI systems, tiered models of service delivery are used to efficiently differentiate instruction for all students.



The need for early identification of students with potentially preventable academic difficulties has led to the use of a new model of intervention: response to intervention (RtI). With early intervention, these students would not become categorized as learning disabled—with the concomitant NCLB requirement of improving all students' academic performance—which would keep students at grade level instead of placing on schools a tremendous task of catching up. RtI is conceptualized as a comprehensive model based upon three guiding principles: (a) it is the purpose of public education to provide all students with a high quality education, (b) it is the responsibility of educators to create the conditions that enable all students to learn, (c) and RtI is a school reform initiative aimed at improving student achievement.

RtI is defined by Brown-Chidsey and Steege (2005), as “a systematic and data-based method for identifying, defining, and resolving students' academic and/or behavioral difficulties” (p. 2). According to Brown-Chidsey and Steege, RtI is a comprehensive model in which research-based decision-making occurs within a series of predetermined problem-solving stages. Brown-Chidsey and Steege state RtI is a scientifically based approach “that can be used to make decisions about educational programs” (p. 5).

RtI is defined by the National Association of State Directors of Special Education ([NASDSE], 2005) as “the practice of providing high-quality instruction and interventions matched to student need, monitoring progress frequently to make decisions about changes in instruction or goals and applying child response data to important decisions” (p. 3). Mellard and Johnson (2008) conceptualized RtI as a set of procedures

that enable schools to identify at-risk learners early and to be more efficient and effective in providing services to those struggling students.

Burns and Gibbons (2008) used a similar definition, stating RtI is “the systematic use of assessment data to most efficiently allocate resources in order to improve learning for all students” (p. 1). They elaborate on the definition, “RtI involves monitoring student response to instructional approaches based on data in order to address the unique needs of each child, and to perhaps reach a more useful diagnosis of learning disability” (p. 3).

The wording in each definition varies, but basically all refer to RtI as a systemic process that is designed to improve student achievement. Inherent in each definition is the belief that, despite it being codified in federal special education law (IDEIA 2004), RtI is a school reform initiative that unifies general education and special education. RtI is intended to allow school personnel to work collaboratively in order to identify students who may be at-risk and to design and implement effective interventions for such students (Brown-Chedsey & Steege, 2005; Fuchs & Fuchs, 2006; Mellard & Johnson, 2008).

## **Reading**

Among the specific objectives found in NCLB is improving the performance of students that are at-risk for reading difficulties. Many struggling readers are referred for special education services and are subsequently identified as having specific learning disabilities (SLD). It is estimated that 80% of students with SLD are in special education predominantly because they have not learned to read (Snell, 2002).

Hall (2008) defines RtI as “a collaborative effort whereby educators in a school or school system jointly take responsibility to help all students learn to read” (p. 17). She

further describes RtI as a “dynamic problem-solving process in which data are integral in making decisions designed to improve reading achievement” (p. 17).

### **Response to Intervention and the Law**

Schools are held accountable for the academic achievement of all students. General education and special education have co-existed as a dual system of education, but recent federal legislation has attempted to create a unified system of accountability for all students, with and without disabilities (IDEIA, 2004; NCLB, 2001). The No Child Left Behind Act of 2001 (NCLB) requires schools to accept responsibility for ensuring all students meet challenging academic standards. Schools are expected to close existing achievement gaps between high and low performing students (NCLB, 2001). By including students with disabilities in NCLB accountability systems, the federal government has raised expectations for all students.

The need to provide educational services to students became more critical in the 1960s and 1970s when parents and advocates called for better regulations in federal law (Schoolmarm, 2003). As a result, the Education for All Handicapped Children Act (EAHCA), was passed in 1975. EAHCA provided for a free and appropriate public education (FAPE) and an individualized education plan (IEP) for all students eligible for special education. EAHCA also provided procedural safeguards for students and parents.

Prasse (2005) notes that by the 1990s, student enrollment in special education and its financial costs swelled. As more and more students were labeled as needing special education, the focus was on putting these identified students in a place, as opposed to providing a service for them to be successful in the mainstream classroom. The categorical funding followed the students with labels to support the place they received

their education. This emphasis on placement and categorical labels was questioned. Due to these increasing frustrations, congress made amendments in the Individuals with Disabilities Educational Act of 1997. The 1997 revisions were instrumental because federal laws delineated that special education was not a place, but a set of services. “IDEA 1997 was important to these reforms and important to understanding how expectations for the way special educators did business were changing” (Prasse, 2005, p. 2).

IDEA 1997 permitted school districts to use up to 5% of federal funding allocation to create services to improve results for all children. The law supported problem-solving approaches for the synchronization of education, health, mental health, and social services. Special education and its related services were to concentrate less on categorical program delivery and paperwork and more on student outcomes and intervention. If data collected by a problem-solving team that produced informative and sufficient findings for determining eligibility, then no additional testing was needed (Prasse, 2005). The 1997 policies laid the groundwork for the 2004 amendment.

No Child Left Behind (NCLB) is a reauthorization of the Elementary and Secondary Education Act of 1965, which provides funding for public schools included in the group of policies known as the *great society* (Brown-Chidsey & Steege, 2005). NCLB impels states to reconsider their assessment systems and urges them to use evidence-based practices. NCLB stresses the need for states to monitor student progress during program implementation to verify that programs are effectively educating students. NCLB regulations also instigate programs seeking to promote preventative strategies. Programs included Reading First, Early Reading First, and Even Start, which

aimed at fostering early literacy interventions, increasing school readiness, and improving literacy skills for students.

In November 2004, Congress reauthorized Individuals with Disabilities Educational Improvement Act (IDEIA). IDEIA 2004 continued previous efforts relating to prevention and intervention. Components of RtI were overtly integrated into federal policy.

The law mandates that when determining if a child has a specific learning disability, as defined in section 602, a local educational agency shall not be required to take into consideration whether a child has a severe discrepancy between achievement and intellectual ability in oral expression, listening comprehension, written expression, basic reading skills, reading comprehension, mathematical calculation, or mathematical reasoning (20 U.S.C.1414 [b][6][B]). IDEIA also states that in determining if a child has a specific learning disability, a local educational agency may use a process that determines whether the child responds to scientific research-based intervention as part of the evaluation procedures described in paragraphs 2 and 3 (20 USC1414[b][6][B]).

The 2004 reauthorization of IDEIA broadened the requirements for teachers to gather their own data regarding student performance and usage of scientific-based methods to gauge student outcomes (Brown-Chidsey & Steege, 2005). Although NCLB applies to all children and IDEIA applies to those in special education, IDEIA expects that a child's performance in the general education classroom be used to determine their educational services as well. Professional development activities are included in the law so that all school staff and problem-solving teams can consult and prepare for the implementation of RtI (Prasse, 2005).

## **Evolution of Response to Intervention**

Historically, children have been identified for special education using a discrepancy model (LDinfo, 2010). The intent of the model is to show that a student can achieve a certain IQ or ability score, yet despite this IQ, his or her actual achievement falls significantly below what would be expected (usually by a minimum of 15 points). The RtI model generates a paradigm shift where IQ no longer matters. Critics of RtI strictly oppose this new paradigm, fearing that failure to identify students with a measurable number will ultimately lead to the demise of special education categories. Currently mandated, the IQ achievement discrepancy criterion is directly correlated to a student's level of identified disability. Additionally, the emphasis on identifying learning disabilities is replaced with a mindset of prevention of disabilities, according to Cruey (2006), who further states "RtI is partly a reflection of a greater commitment to the philosophical ideal that all children can learn. And we assume that the problem is the teaching, not the child, until we can prove otherwise" (p. 10).

Utilizing the discrepancy model to determine a child's eligibility for special education services has historically resulted in instances of questionable placement and has incorporated a tremendous amount of subjectivity into a process that professes to be impartial and objective (Macmillan, Gresham, Bocian, & Lambros, 1998). Estimates suggest that the number of students identified with learning disabilities has increased more than 200% since 1977 when the category was established (Bradley, Danielson, & Doolittle, 2005). A study by Mcmillan et al. showed that approximately 50% of students referred by classroom teachers had an IQ score between 71 and 85, and 16% of students referred had an IQ below 70. The intellectual criterion for the diagnosis of intellectual

disability limitations in intellectual functioning are typically thought to be present if an individual has an IQ score of 70 or below (American Association on Intellectual and Developmental Disabilities, 2008). The Macmillan study showed that only 14% of the children with an IQ below 70 were identified with the disability known as mild mental retardation (MMR). In addition, 44% of the MMR cases were labeled as learning disabled (LD) by schools, despite their IQ in the range of MMR (an exclusionary criterion) and not demonstrating a discrepancy between ability and achievement (a regulatory requirement).

### **RtI as a Three-Tiered Model**

Response to Intervention is based on a three-tiered model. In Tier 1, all students are screened for a baseline score and continue to be assessed regularly to determine the appropriateness and success of the current instructional practices. With the appropriate curriculum and strategies, approximately 80% of the students will meet the predetermined benchmark. Tier 2 focuses on using targeted interventions, such as differentiated instruction, to assist students that do not make adequate progress in Tier 1.

There are several ways of selecting Tier 2 interventions. The literature describes a standard-protocol approach in which schools automatically provide a student with a scientifically validated intervention upon identification of risk (Burns & Gibbons, 2008; NASDSE, 2005; Vaughn et al., 2008). A second method of selecting interventions involves a problem solving approach in which a problem-solving team uses an inductive approach to identify and define a problem and then develops an individualized intervention plan to address the problem (Fuchs, Mack, Morgan, & Young, 2003; Mellard & Johnson, 2008; Vaughn et al., 2008). Some researchers suggest that students in Tier 2

should receive standard protocol interventions and that schools reserve the more intensive individualized problem-solving approach for students who are unsuccessful in Tier 2 (Burns & Gibbons, 2008; Mellard & Johnson, 2008). Experts are divided into two camps, each advocating for one approach rather than the other; a third option is the hybrid approach. National Association of State Directors of Special Education (NASDSE) advocates for either approach, based on the belief that the entire process exists as a problem-solving approach.

Research predicts that approximately 15% of targeted students will show improvement with the more intensive Tier 2 interventions. Students who are not successful move on to Tier 3 interventions. At Tier 3 teachers provide intensive individualized instruction. Research shows that approximately 5% of the students will not respond to Tier 3 interventions and may indeed have a learning disability. These students are referred for formal special education testing (Azzam, 2007; Fuchs & Fuchs, 2006). Critics of RtI contend that it is not a special education initiative, but rather a general education initiative that may or may not, depending on the quality of instruction, lead to reduced referrals for special education assessment.

### **Key Components to Response to Intervention**

Key components of RtI include high quality, evidence-based general education instruction, universal screening and early identification of students at risk for academic difficulty, research-based decision-making, early and effective interventions, and progress monitoring occurring within a recursive process (Bradley et al., 2007; Brown-Chidsey & Steege, 2005; Fuchs & Fuchs, 2006; Johnson, Mellard, Fuchs, & McKnight, 2006). At each step in the process, general and special education personnel share the



responsibility for implementing a collaborative problem-solving approach for identifying struggling students and providing them with effective interventions (Mellard & Johnson, 2008). Some researchers state fidelity of implementations of both the process and the interventions is essential to ensuring student achievement and the integrity of RtI (Brown-Chidsey & Steege, 2005; Mellard & Johnson, 2008). According to Mellard and Johnson, all aspects of RtI, including the problem-solving process, rely upon fidelity of implementation. Specific components of RtI, such as assessment and instructional interventions, must be implemented with fidelity (Mellard & Johnson, 2008). Standardized interventions are considered valid only if they are implemented according to the specifications provided by design (Fuchs & Fuchs, 2006).

The literature consistently names high quality, evidenced-based general education instruction as the foundation without which, it is impossible to implement RtI.

An effective RtI model is based upon the assumption that the core instruction and assessment provided within all general education classrooms are evidence-based and of high quality (Bradley et al., 2007). In a three-tiered model, Tier1 is the primary level of intervention, and it is the core program available in all general education classrooms.

Teachers are expected to use differentiated instruction and flexible grouping to meet the needs of most learners in the general education classroom.

### **Response to Intervention as a Problem-Solving Process**

Consistent among the numerous conceptualizations of RtI is the idea that RtI and problem solving are inextricably woven together within a comprehensive approach to improving teaching and student reading achievement. NCLB (2001) and IDEA (2004) established an increased demand for schools to implement a problem-solving approach to

the process of identifying and providing early intervention for struggling students. Collaborative problem-solving teams are considered to be an integral component of the RtI framework (Johnson et al., 2006). Allen and Graden (2002), in their description of collaborative problem solving, state that the collaboration refers to the working relationships among members of the team. A basic assumption is that all members of the team have a shared understanding of roles, procedures, and responsibilities involved in the problem-solving process. Teams typically include general and special education teachers, parents, school psychologists, and site administration. Collaborative problem solving requires that all participants be actively engaged in meaningful research-based decision making at each phase of intervention (Allen & Graden, 2002). It is the task of the problem-solving team to identify the conditions that will enable students to achieve the targets set by the team.

Problem-solving teams' initial step is to identify a problem. Problem identification in RtI involves the observation of student performance through the collection of student performance data (Shinn, 2005). Another key component of RtI is universal screening, a procedure that enables schools to accomplish the necessary task of identifying students who are at risk for reading difficulties (Brown-Chidsey & Steege, 2005). Universal screening can be accomplished with the use of curriculum-based measurement (CBM) (Brown-Chidsey & Steege, 2005). CBM consists of a standardized set of measures that are both reliable and valid as indicators of general reading proficiency (Fuchs & Fuchs, 2006).

Once universal screening results are recorded, problem-solving teams analyze school-wide data. Initially, the team uses the results to determine the efficacy of the

general reading program. If the analysis shows evidence of low performance of more than 20% of the students, the school-based teams assist their school in implementing broad-based interventions in curriculum and instruction (Brown-Chidsey & Steege, 2005). Once effective core reading instruction is established, the results of universal screening can be used to identify students who are at-risk for reading failure (Shinn, 2005).

Once data have been analyzed and at-risk students identified, the problem solving team convenes to define the problem. The team focuses on identifying specific problems and the magnitude of the problems (Brown-Chidsey & Steege, 2005). If it is determined the problem is significant, the team develops a hypothesis about the student's difficulty and prepares to select one or more interventions designed to alleviate the problem (Mellard & Johnson, 2008). The next step for the team is designing the intervention plan. The analysis of student assessment data allows the school to engage in data-based decision making for the purpose of determining appropriate interventions for at-risk students (Brown-Chidsey & Steege, 2005). Interventions are validated and chosen based on the belief that they will reduce or eliminate the difference between the child's current performance and expected performance (Brown-Chidsey & Steege, 2005). The team sets measurable goals for improvement. The intensity of interventions increases according to the intensity of student need (Vaughn & Klingner, 2007).

Next the team moves on to implementation. The two major components of this stage are implementing interventions and monitoring student progress (Brown-Chedsey & Steege, 2005). The implementation stage of problem-solving models involves closely monitoring intervention and data collection (Shinn, 2005). In a three-tiered model of RTI,

this stage may incorporate Tier 2 and Tier 3 interventions. The most prevalent recommendation for monitoring student progress is CBM (Shinn, 2005). The use of CBM throughout the intervention period allows the educators to monitor the progress of students in response to instructional interventions and to formatively assess the success of those interventions.

Progress monitoring of students receiving interventions occurs frequently, as often as once or twice each week or every other week. Progress monitoring allows the problem-solving teams to determine if an intervention has been effective and whether it should continue or if it needs to be revised. The initial task of RtI problem-solving teams is to ensure that classroom instruction is generally effective (Mellard & Johnson, 2008). They must also ensure early identification and intervention for at-risk students, according to Mellard and Johnson. In later stages, problem solving also serves as part of the special education eligibility decision process (Shinn, 2005). Kovalski, Tucker, and Stevens (1996) refer to problem solving as “a systematic search for what works” (p. 44). Effective RtI problem-solving teams systematically set goals, monitor growth, make adjustments, and evaluate effects.

### **Role Changes With RtI**

Key aspects of educator’s roles may change with effective implementation of RtI (Mellard & Johnson, 2008). School psychologists may be expected to spend more time in general education classrooms and become more involved in monitoring student’s academic progress. They may also decrease the amount of time spent conducting traditional student evaluations. Implementation of RtI requires general education teachers to provide more differentiated instruction and to take a more active role in providing

interventions (Johnson et al., 2006). General education classroom teachers are required to administer universal screening and progress monitoring measures, collect assessment data, and analyze data. Within a RtI model, teachers are expected to collaborate with colleagues, crossing over traditional boundaries.

Special education teachers will also have changes in the role they play. They may be called upon to support and supplement Tier 1 instruction. Special educators are involved in the problem-solving process (Cummings et al., 2008). They are expected to collaborate more often, provide assessment and intervention assistance, create and monitor school-wide data systems, analyze data, and serve as staff trainers in assessment and problem solving procedures (Mellard & Johnson, 2008).

Principals play a key role in RtI. According to Hall (2008) school administrators are responsible for creating the conditions that support the effective implementation of RtI. These conditions include a collaborative school culture, high quality professional development, reasonable caseloads and schedules, and sufficient resources for implementing RtI (Mellard & Johnson, 2008). It is also the site administrator's responsibility to create school-based problem-solving teams and monitor the fidelity of RtI.

### **Response to Intervention Verses the Discrepancy Model**

In the mid 1960s, the definition of learning disabilities and the learning disability classification criteria became highly controversial. The lack of clear cut criteria to explain the processing deficits and underachievement demonstrated by some students, caused congress to become concerned that there would in turn be an over-identification

of students with learning disabilities. Congress demanded a compromise, which resulted in the current discrepancy model for special education identification (Prasse, 2005).

Prior to the most recent reauthorization of IDEA, learning disability identification was based on the discrepancy model. This model was often referred to as the “wait to fail” approach to learning disability identification (Brown-Chidsey, 2007). The discrepancy model requires that a significant gap between a student’s ability and his or her achievement is identified. Due to the broad definition and ambiguous criteria for qualifying a student with a learning disability, the category has “become a sociological sponge to wipe up the spills of general education” (Wedl, 2005, p. 4). Special education referrals were often made as early as first grade, but the required discrepancy frequently was not apparent until third or fourth grade, which prevented students from receiving the necessary services (Gerssten & Domino, 2006; Wedl, 2005).

The IQ discrepancy criterion is potentially harmful to students as it results in delaying interventions until a student’s achievement is sufficiently low so that a discrepancy is achieved. For most students, identification as having a specific learning disability (SLD) occurs at an age when the academic problems are difficult to remediate even with the most intensive remedial efforts (Torgenson et al., 2001). The “wait to fail” model does not result in significant closing of the achievement gap.

The RtI model changes the focus from identifying learning disabilities to preventing them (Cruey, 2006). Regardless of disability category or socioeconomic status, RtI allows all students to receive the necessary educational assistance. Research-based interventions and high quality instruction are provided for all students. Each student’s learning rate and level of performance is documented and monitored.

Educational decisions are made on an individual basis (National Association of Special Education Directors & Council of Administrators for Special Education, 2006).

The discrepancy model assesses a student's ability and achievement at only one point in time, while the RtI model assesses the same characteristics over an extended period of time (Fletcher, Francis, Morris, & Lyon, 2005). RtI advocates embrace the methodology as a way of distinguishing children with true learning disabilities from those that may be low achievers for some other reason.

The discrepancy model functions on the premise that a student who exhibits a severe discrepancy between ability (IQ score) and achievement meets the criteria of a student with a learning disability (LDinfo, 2010). The criticisms of this methodology are over-identification of minorities, disproportionality, no services until failure is apparent, no connection between the educational assessment and actual instruction, and a significant increase in students identified as learning disabled (National Center for Education Evaluation and Regional Assistance, 2009). A major change in IDIEA 2004 was the way students may be identified for special education services. To be evaluated for special education services in the area of a learning disability, a child must have received effective instruction, and progress must have been monitored through reported data-based achievement assessments. Student progress monitoring must be documented and shared with parents. This is helpful in eliminating students from special education when the academic deficits have been caused by poor instruction. School districts provide professional development and training for staff members in order to establish common language, assessment criteria, and instructional pedagogy. The discrepancy model is a reactive measure to a student's failure to progress academically. The RtI

model is an early-intervention, proactive measure to prevent student failure (Burns & Gibbons, 2008).

Utilizing the discrepancy model, students either qualify for services and receive additional supports, or do not qualify and receive no additional support even though the need is still present. The RtI model utilizes a tiered method of service delivery that allows every child to receive assistance as needed. Fletcher et al. (2005) state, “Models that include RtI have the promise of incorporating functional outcomes because they are tied to intervention response” (p. 513). This addresses the achievement gap before it can become well established and cyclical. The discrepancy model focuses on the variables that may be altered in the best educational interest of the child. RtI is a solutions-focused methodology (LDinfo, 2010).

### **Defining California’s (RtI<sup>2</sup>)**

In California, Response to Instruction and Intervention (RtI<sup>2</sup>) is a systematic, data-driven approach to instruction that benefits every student. California has expanded the notion of RtI<sup>2</sup> to communicate the full spectrum of instruction, from general core to supplemental or intensive, to meet the academic and behavioral needs of students (CDE, n.d., 2011). Of the many solution strategies that have been employed nationwide, the RtI<sup>2</sup> model is an approach that attempts to create conditions necessary for closing the achievement gap. RtI<sup>2</sup> focuses on the individual student and provides a vehicle to strengthen performance for struggling students before educational problems increase in intensity and special education seems the only viable option.

A cohesive RtI<sup>2</sup> process integrates resources from general education, categorical programs, and special education into a comprehensive system of core instruction and



interventions to benefit every student. The California Department of Education determined the following to be the core components of RtI<sup>2</sup> in California (CDE, 2011):

1. High-quality classroom instruction. Students receive high quality and culturally relevant, standards-based instruction in their classroom setting by highly qualified teachers.
2. Research-based instruction. The instruction that is provided within the classroom is culturally responsive and has been demonstrated to be effective through scientific research.
3. Universal screening. School staff assesses all students to determine students' needs. On the basis of collected data, school staff members determine which students require close progress monitoring, differentiated instruction, additional targeted assessment, a specific research-based intervention, or acceleration.
4. Continuous classroom progress monitoring. The classroom performance of all students is monitored continually within the classroom. In this way, teachers can identify those learners who need more depth and complexity in daily work and those who are not meeting benchmarks or other expected standards and adjust instruction accordingly.
5. Research-based interventions. When monitoring data indicate students' lack of progress, an appropriate research-based intervention is implemented. The interventions are designed to increase the intensity of the students' instructional experience.
6. Progress monitoring during instruction and interventions. School staff members use progress-monitoring data to determine the effectiveness of the acceleration or

intervention and make any modifications as needed. Carefully defined data are collected on a frequent basis to provide a cumulative record of the students' progress, acceleration, and/or response to instruction and intervention.

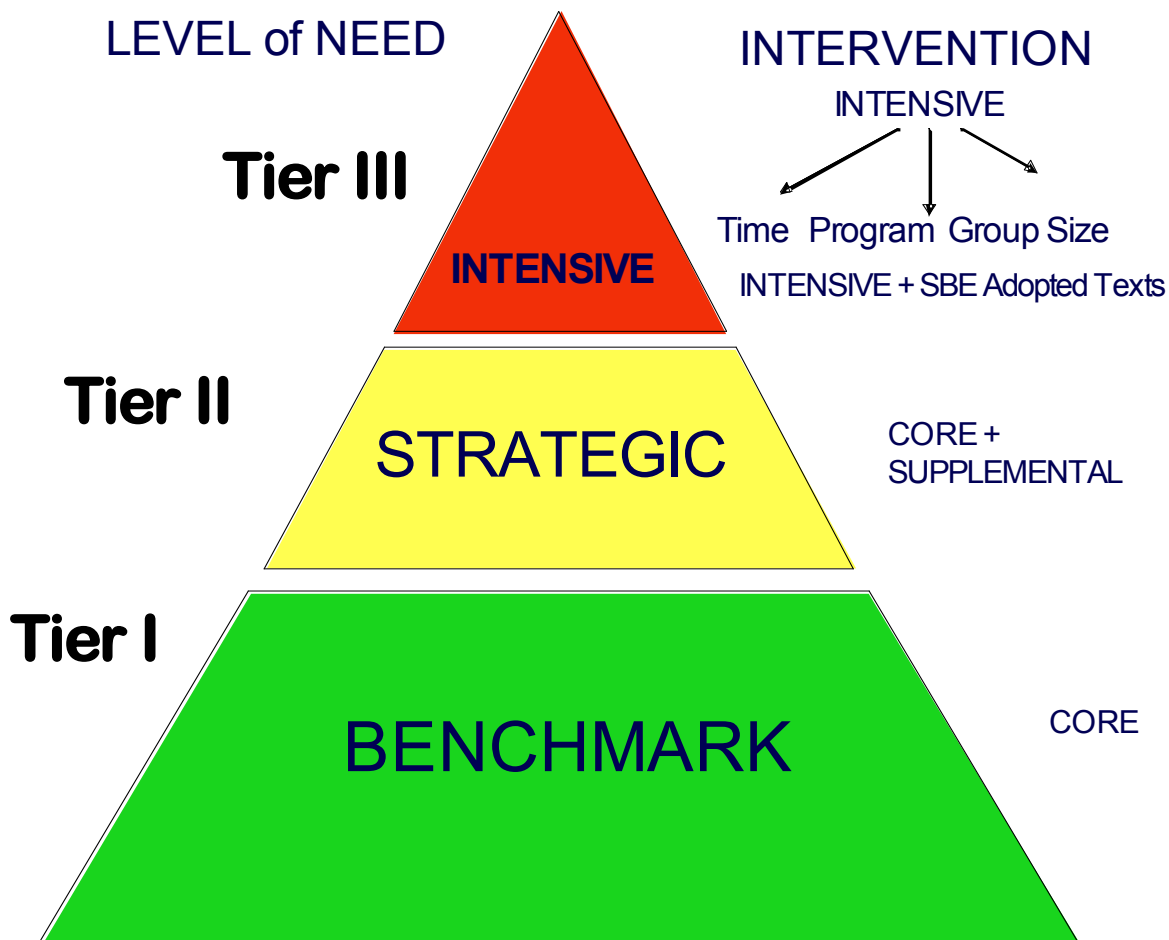
7. Fidelity of program implementation. Student success in the model requires fidelity of implementation in the delivery of content and instructional strategies specific to the learning and/or behavioral needs of the student.
8. Staff development and collaboration. All school staff members are trained in assessments, data analysis, programs, and research-based instructional practices and strategies. Site grade-level or interdisciplinary teams use a collaborative approach to analyze student data and work together in the development, implementation, and monitoring of the intervention process.
9. Parent involvement. The active participation of parents at all stages of the process is essential to improving the educational outcomes of their students. Parents are kept informed of the progress of their students in their native language, by various modes of communication, and their input is valued in making appropriate decisions.
10. Specific learning disability determination. The RtI<sup>2</sup> approach may be one component of the process of determining a specific learning disability as addressed in the IDEA of 2004 statute and regulations. As part of determining eligibility, the data from the RtI<sup>2</sup> process may be used to ensure that a student has received research-based instruction and interventions.

RtI<sup>2</sup> is used in schools in the following three ways:

1. Prevention: All students are screened to determine their level of performance in relation to grade-level benchmarks, standards, and potential indicators of academic and behavioral difficulties. Rather than wait for students to fail, schools provide research-based instruction within general education.
2. Intervention: Based on frequent progress monitoring, interventions are provided for general education students not progressing at a rate or level of achievement commensurate with their peers. These students are then selected to receive more intense interventions.
3. Component of specific learning disability (SLD) determination: The RtI<sup>2</sup> approach can be one component of SLD determination as addressed in the Individuals with Disabilities Educational Act (IDEA) 2004 statute and regulations. The data from the process may be used to demonstrate that a student has received research-based instruction and interventions as part of the eligibility determination process.

### **Implementation of RtI<sup>2</sup>**

There are multiple ways to implement RtI<sup>2</sup>. As in RtI, there is variability in that RtI<sup>2</sup> is generally viewed as a three-tier approach that uses research-based interventions. Instruction may be intensified based on individual student needs (CDE, n.d., 2011). Figure 1 shows a commonly used tiered framework incorporating technology used in program improvement.



*Figure 1.* Three-tier implementation of RtI<sup>2</sup>.

**Tier I: Core instruction.** In Tier I, the focus is on a core instructional program that uses a scientifically validated curriculum with all students in the general education classroom. This is good first teaching that occurs school-wide with highly qualified teachers, and State Board of Education approved core curriculum with fidelity. During the course of instruction, the school uses universal screening measures to identify each student's level of proficiency in key academic areas. The screening data are organized to enable the review of both individual and group performance on critical measures. Instruction is differentiated in response to this data for small groups and individual

students. Students who continue to lag behind their peers despite the provision of targeted instruction may receive additional Tier I instruction or may be considered for more intensive interventions at Tier II.

**Tier II strategic: Targeted short-term interventions.** In Tier II, supplemental instruction is provided to those students who exhibit a poor response to the targeted instruction provided through Tier I. Tier II intervention is provided in addition to, and not in lieu of, core instruction and can be delivered through an individualized problem-solving approach or a standard treatment protocol. Schools in *program improvement* status are required to follow California State Board of Education (SBE) approved intervention regulations.

A problem-solving approach allows school teams to design individualized interventions to address specific needs of each student. A standard treatment protocol uses a set of research-based practices to provide interventions in a systematic manner with all participating students who have a similar need. Such interventions are usually highly structured and have a high probability of producing positive results for a large number of students.

Tier II supplemental interventions may be discontinued for students who improve in critical academic or behavioral measures as a result of the intervention. Some students may exhibit progress but continue to need Tier II supplemental supports. Those students who fail to display meaningful progress in spite of supplemental supports are considered for more intensive interventions in Tier III.

**Tier III intensive: Interventions with increased intensity.** In Tier III, students receive a greater degree of intensive interventions. Modifications in frequency, duration,

or teacher-student ratio (or all three) are strategies to increase intensity. SBE approved intervention programs based on research may serve as the core curriculum for students in this intensive level of intervention at fourth grade and above. As in Tier II, interventions are provided flexibility depending on the school site resources and careful blending of all interventions.

In California, Tier 3, referred to as Intensive, is slightly different than most states, (California Department of Education). California requires an alternative core curriculum for Reading Language Arts (RLA). There are six state approved programs that districts may purchase to provide intensive instruction for students working at this tier. The California Department of Education (CDE) also recommends that students working at this level receive two and a half to three hours of instruction in this curriculum daily. California also describes the type of curriculum and time needed for Mathematics at great detail in the Math Framework.

As students needs increase, they are moved from Tier to tier. As students move from tier to tier, the intensity of intervention increases. To increase intensity, interventions must be teacher focused, increase in duration, and frequency, and must be delivered in smaller groupings of similar ability. RtI becomes as simple, and as complex, as this: the right students, in the right class, with the right curriculum, for the right amount of time, with the right teacher.

### **Nonresponders**

Students who do not respond to those targeted interventions are referred for a comprehensive evaluation to determine eligibility for special education and related services under the category of specific learning disability (SLD). The student's response

to interventions, as reflected in the data collected during the RtI<sup>2</sup> process, is reviewed as part of the eligibility determination.

### **Principles of RtI<sup>2</sup>**

CDE states the following seven common principles of RtI<sup>2</sup> in its document “Determining Specific Learning Disability Eligibility Using Response to Instruction and Intervention” (CDE, 2009):

1. We can effectively teach all students. All RtI<sup>2</sup> practices are based on the assumption and belief that all students can learn. It is then the responsibility of school staff to identify the most effective curricular, instructional, and environmental conditions that enable learning and to provide the necessary resources to enable each student to learn.
2. Use research-based, scientifically validated interventions and instruction. The requirement to use scientifically based curricula and interventions in No Child Left Behind ensures that students are exposed to curriculum and teaching that has the greatest degree of effectiveness.
3. Use assessment for three different purposes. In an RtI<sup>2</sup> process, three types of assessments are used: (a) universal screening to determine which students need closer monitoring, differentiated instruction, or a specific intervention; (b) progress monitoring to determine if interventions are producing the desired results; and (c) diagnostic tests to determine what students can and cannot achieve in important academic areas.
4. Intervene early. It is best to intervene early when problems are relatively small and before students lag further behind their peers.

5. Use a multitier approach to intervention. To achieve high rates of success for all students, instruction should be differentiated in both nature and intensity. A tiered model of intervention is an effective way to differentiate instruction.
6. Monitor student progress to inform instruction. The use of assessments that can be collected frequently and provide information regarding progress is important to determine the effectiveness of instruction and intervention.
7. Use data to make decisions. A data-based decision regarding student response to intervention is central to RtI<sup>2</sup> practices. Decisions in RtI<sup>2</sup> practices are based on the collective judgment of staff and parents who are directly informed by student performance data. This principle requires both ongoing data collection systems to be in place and the data to be used for making informed instructional decisions.

### **District Implementation of RtI**

Change is a necessary but difficult component of the growth of any successful organization. Dufour and Eacker (1998) stated, “schools have demonstrated time and again it is much easier to initiate than to sustain it to fruition. Until changes become so entrenched that they represent the way we do things around here, they are extremely fragile” (p. 105). Fullan (1993) maintains that there are three dimensions to change in school settings: (a) new materials, (b) new behavior and practices, and (c) new beliefs and understanding. These dimensions are critical to the success of any new initiative and must be systematically addressed with the people involved in the change process in order to ensure that desired changes become common practice.

Beaumont Unified began its RtI implementation by looking at district belief systems. The district established a District Leadership Team consisting of (a) all cabinet



members; (b) directors of accountability, student services, and special education; (c) all principals and assistant principals; (d) a team of teachers (2 to 4) from each site; (e) and a representative of both bargaining units. This team met to establish district goals that would guide us in all decision making. During this time it was discussed and decided that all learners would be our focus, regardless of labels such as ELL or special education. With this foundation, the district began its implementation of RtI. Principals and lead teachers were given professional development on RtI and the development of a *pyramid of interventions*. Each site was directed to establish their own pyramid based on their individual site needs and resources. An intensive intervention curriculum for English Language Arts was adopted and implemented at every site for Tier 3 students (California Gateways). Time was allocated at each site for teachers to meet to look at data and decide on student placement and movement between tiers. At the secondary level a great deal of work was done on revising master schedules to meet the needs of all learners. District benchmark assessments and curriculum-embedded assessments were used to monitor student progress. Each site developed its own plan for meeting the needs of all learners. Some sites leveled students by ability for core areas, while others continued with traditional mixed levels of students with Tier 2 and Tier 3 students getting additional time and support. General and special education teachers teamed together to provide support to all learners.

### **Concerns-Based Adoption Model**

Research for this study was conducted using the well-established theory of the CBAM (Hall et al., 1973). An important component of CBAM is the ability to provide

“a tool that can be used for introducing change and monitoring its implementation”  
(Hord, Rutherford, Huling-Austin, & Hall, 1987, p. 8).

Systemic school improvement is a process of continuous, coordinated change that improves student achievement in academic, social, and emotional areas. Change is a required element of the systemic school improvement process (Barth, 1990). Literature focused on the process of change in school settings (DuFour, 1997, 2001; DuFour & Eacker, 1998; Fullan, 1985; Hord et al., 1987; Marzano, 2003) indicates that teachers, and their thoughts regarding the school improvement initiatives, are one of the critical components in the change process. The CBAM is based on the individual’s journey through the change process (Hord et al., 1987).

There is evidence to suggest that educational innovations and reforms are not always implemented as envisioned by planners and policy makers (Hall & Hord, 2001). The CBAM is an instrument that educational leaders used to evaluate innovations; it shows them how the individuals most affected by change react to the implementation of these innovations (Hall & Hord, 2006). CBAM is a diagnostic model, originally proposed by Hall, Wallace, and Dorset (1973) in the Research and Development Center for Teacher Education (RDCTE) of the University of Texas at Austin. CBAM was based on the early work of Francis Fuller, who studied the mental health of pre-service teachers. CBAM has been used extensively over the past 30 years to support and study the implementation of innovative educational initiatives. According to CBAM, the concerns expressed by teachers change in logical, predictable stages as they implement an innovative program and become competent teaching the content.

In the early stages of implementation, teachers are likely to have self concerns. They will want specific information about the innovation and how it will affect them. As they become more advanced in the implementation, their concerns change and focus on managing the tasks that are associated with the change. When teachers' concerns center on how the innovation or change affects students and how improvements can be made, they have moved into the impact stage (Hord et al., 1987).

CBAM is built on the personal nature of change, and it focuses on the individual and his or her specific concerns as he or she implements a specific change or innovation. CBAM has been used in a variety of settings to identify teacher stages of concern and predict teacher's ability to successfully implement an innovative program. CBAM uses two sets of concepts and related measures. One set is for diagnosing the status of implementation, the other for prescribing interventions and moving the implementation process along. Hall and Hord (2006) state that CBAM research supports seven assumptions:

1. Understanding the point of view of the participants in the change process is critical.
2. Change is a process not an event.
3. It is possible to anticipate much that will occur during a change process.
4. Innovations come in all shapes and sizes.
5. Innovations and implementation are two sides of the change process coin.
6. To change something, someone has to change first.
7. Everyone can be a change facilitator.

Using these assumptions as a foundation, CBAM focuses on four components: innovations configuration (IC), stages of concern (SoC), levels of use (LoU), and intervention taxonomy. These are described in the subsections that follow.

**Innovation configurations (IC).** Berman and McLaughlin (1978) suggested that adaptation was essential in the change process. In order to evaluate the implementation of an innovation, change agents needed a clear picture of what implementation looked like in practice. Hall and Louks (1981) called the tool for communicating this picture of implementation *innovation configurations*. Hall and Louks stated that providing ICs increased the possibility of successful implementation of the innovation by (a) focusing on the key components of the innovation; (b) describing a clear picture of what teachers and students would be doing; and (c) what behaviors, actions, and artifacts would be observed in the room. The CBAM innovation configuration is the documentation of the processes involved when undergoing change and implementing an innovation. The documentation becomes a component of an organization's institutional memory, providing evidence of what worked and what did not in the strategy-implementation process (Heck, Steigelbauer, Hall, & Louck, 1981).

**Stages of concern (SoC).** The SoC deals with the users' concerns related to their perception of or experience with the innovation. The SoC provides an instrument for the measurement and analysis of individuals' concerns, issues, perceptions, and attitudes toward the adoption process when implementing an innovation (George, Hall, & Stiegelbauer, 2006). CBAM describes seven stages of concern that teachers experience as they adopt a new innovation, whether a program or practice (Hall & Loucks, 1981). The focus of the CBAM model is the viewpoint of the individual and his or her concern

statements relating to implementation of the innovation. The seven stages of concern that users have when they implement change are segmented into three categories: self, management, and impact. The SoC are not designed to be progressive, and teachers can have multiple concerns within the various stages (George et al., 2006).

1. **Self:** The first three stages within the *self* category, usually occur prior to actual implementation, and include awareness, informational, and personal stages. At the awareness stage, teachers have little concern or involvement with the innovation. At the information stage, teachers have knowledge that the innovation exists, but see it as someone else's program. At the personal stage, teachers want to learn about the personal ramifications of the innovation. They question how the innovation will affect them.
2. **Management:** The second category, management, relates to the tasks of the innovation. Teachers learn the processes and tasks of the innovation (Hord et al., 1987). Teachers focus on gaining an understanding of the information, increasing personal knowledge and skills, and acquiring resources to support the implementation. Knowing teachers concerns at this stage, guides leaders to the resources teachers need for successful implementation.
3. **Impact:** The final category, impact, includes the last three stages of concern: consequence, collaboration, and refocusing (Hord et al., 1987). As teachers focus on the innovation's impact on students, they begin to reflect on their practices and on changes in student learning. Teachers begin to collaborate and cooperate with each other in the implementation of the innovation. Teachers share lesson plans, classroom strategies, and ways they are responding to the implementation issues

and problems. As teachers extend their knowledge and skills, they become leaders that consider the benefits of the innovation and think of additional alternatives that may work better. They have become proactive rather than reactive in relation to the innovation.

The CBAM model is based on the theoretical framework that people undergoing change will progress in the attitudes they convey and in their use of the change introduced into their environment (Hall & Hord, 1987). An important aspect of the concerns-based approach is that an “effective change facilitator understands how...clients perceive change and adjusts.... accordingly” (Hall & Hord, 1987, p. 5). The following chart summarizes the actual SoC about the innovation, as defined in CBAM (Hall et al., 1979, p. 5):

- Stage 0. Awareness: Little concern about or involvement with the innovation is indicated
- Stage 1. Informational: A general awareness of and interest in learning more detail about it is indicated
- Stage 2. Personal: Individual is uncertain about demands of the innovation and his or her role with the innovation
- Stage 3. Management: Attention is focused on the processes and tasks of using the innovation and the best use of information and resources
- Stage 4. Consequences: Attention focuses on impact of the innovation on (people) in his or her immediate sphere of influence
- Stage 5. Collaboration: The focus is on coordination and cooperation with others regarding use of the innovation

- Stage 6. Refocusing: The focus is on exploration of more universal benefits from the innovation, including the possibility of major changes or replacement with a much more powerful alternative

**Levels of use (LoU).** In contrast to the SoC, the LoU does not focus on the concerns or attitudes of individuals, but focuses on the actual use of an introduced innovation in an organization and the rate of adoption, as related to employee behaviors (Loucks et al., 1998). As related to SoC, the individuals' LoU are identified in eight categories: nonuse, orientation, preparation, mechanical use, routine, refinement, integration, and renewal (Loucks et al., 1975). The individuals' SoC are described as awareness, informational, personal management, consequences, collaboration, and refocusing, as described by Loucks et al. The SoC model suggests that, as individuals' concerns are addressed, the individuals' LoU will increase accordingly. In summary, CBAM consists of three tools, SoC, LoU, and innovation configuration, designed to monitor the effects of change and to collect information required to facilitate change.

### **Updates to RtI**

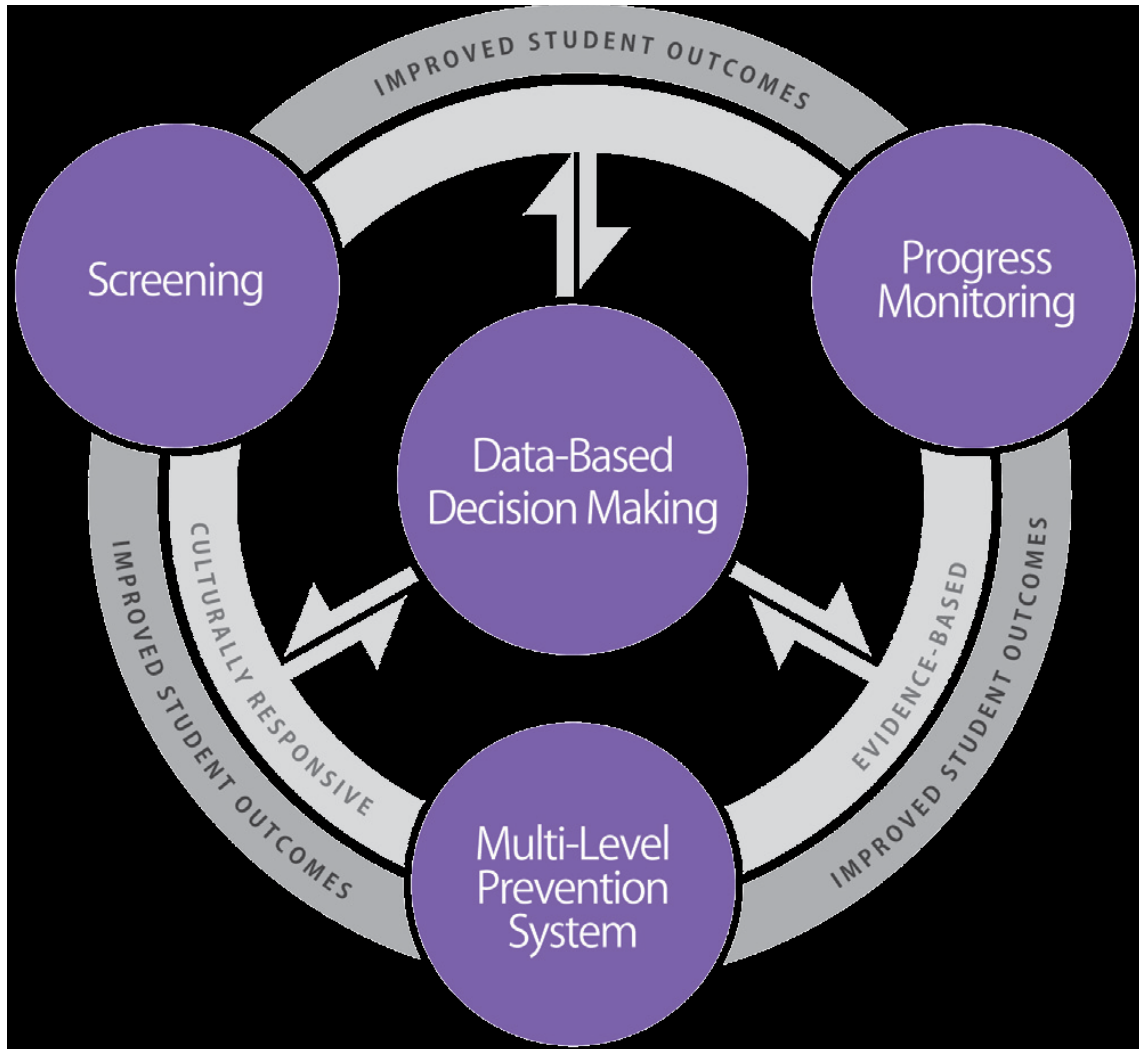
Response to Intervention burst into the field of education. First, No Child Left Behind in 2001 with its Reading First program gave a boost to the framework by encouraging schools to use it in their literacy programs. Next the 2004 reauthorization of IDEA said states must allow districts to use RtI as a tool for determining eligibility for specific learning disability. RtI started as a way to identify and teach struggling readers and special education students, but is fast becoming a way to change school for all students (Education Week, 2011).

A survey of district administrators in 2010 found that 61% had implemented an RtI framework or were in the process of implementing RtI in their district. In 2007, the same survey found only 20% implementation. RtI has been credited as a factor in reducing the overall rate of identification of students diagnosed with a specific learning disability, which identification has steadily been decreasing since 2005. A. Posny, the assistant secretary overseeing the U.S. Department of Education's Office of Special Education and Rehabilitative Services, told a group of researchers in Washington at an RtI summit in December 2010 that RtI has not only changed special education; it has changed education as a whole, and will continue to do so (Education Week, 2011).

The symbol most often associated with RtI is the pyramid of interventions. It gives a quick representation of how an RtI model can function in a school. It is the visual model of increasing duration, intensity, and frequency to meet students' academic and behavioral needs. The National Center for Response to Intervention is now promoting a more complex model of RtI.

This new visual describes the four major components of RtI: screening, progress monitoring, data based decision making, and multi-level (tiered) prevention system (see Figure 2). This is evidence of the increasing use and depth of RtI. As schools and districts continue to experience student success through this model, it will continue to deepen in focus and take a stronger hold in our educational system. With the reauthorization of NCLB, followed quickly by a reauthorization of IDEA, all educators are expecting RtI to continue to gain strength.





*Figure 2.* National Center for RtI new visual representation of the model.

## **Chapter 3: Methodology**

### **Introduction**

Accountability in the education system is higher than ever before. Today we must hold ourselves accountable for the results of all children. Response to Intervention (RtI) is a way of thinking about student learning and the organization of resources at a school site and district to ensure that all students can and will learn. RtI is a proven approach that has shown impressive results toward eliminating academic and behavioral difficulties. Two years after beginning the implementation of RtI in the district schools that are part of this study, administrators knew little of the effectiveness of its implementation. No studies had yet been conducted, and data was limited. Thus the present research was a timely attempt to determine whether the implementation of RtI is occurring in all schools in Beaumont Unified School District, and what changes needed to be made to professional development to enhance the implementation of RtI in Beaumont. This chapter describes the research questions, design, setting, population sample, instrumentation, data sources, data collection methods, human subjects considerations, relevant associated prior research data, and data analysis used to investigate the questions of this study.

### **Purpose of the Study**

The purpose of this study was to identify the perceptions, concerns, and level of acceptance of teachers in the district toward the implementation of RtI, in order to provide more effective professional development in the future.

### **Research Questions**

- Question 1: What is the composite SoCQ profile of BUSD teachers in regard to the overall perceptions and level of acceptance by the user in the implementation of RtI as measured by the SoCQ from CBAM?
- Question 2: What are the overall perceptions and level of acceptance of BUSD teachers in regard to the implementation of RtI related to selected demographic characteristics of the employees, as measured by the SoCQ from CBAM, with respect to (a) job location (elementary site or secondary site) and (b) number of years teaching?
- Question 3: What other issues or concerns are seen as significant to the BUSD teachers, as determined by the responses to the open-ended question section of the SoCQ from CBAM?

### **Research Approach and Design**

The study was designed to identify teachers' perceptions and levels of acceptance when implementing RtI in a medium-sized school district in southern California. The observed results will be used for future district planning and for continuing improvement of similar implementations.

The method of research used in this study was Descriptive Quantitative research. The data were obtained from multiple sources and collected in accordance with human subject research principles, using a SoCQ distributed approximately 2 years into the implementation of RtI in the district (Beaumont Unified). The data were analyzed in response to the research questions.

The intention of the research was to obtain insight into the concerns and acceptance level of the implementation of RtI, as perceived by teachers. The study attempted to answer the research questions through a study of a public school district that had recently implemented RtI. The research was conducted in a school district where they had begun their implementation of RtI 2 years prior. The subjects selected to participate represented multiple grade levels and multiple school sites within the district. A detailed collection of empirical material was gathered through the CBAM SoCQ.

### **Population and Sample**

The school district consists of six elementary schools, two middle schools, one comprehensive high school, and one continuation high school. All schools began their implementation of RtI at the same time. Each school was asked to create their own RtI plan, with the one non-negotiable, being they were required to have an Intensive Intervention in English Language Arts, and were required to use the same curriculum for this. All teachers were invited to participate in the study. A letter explaining the study and asking for voluntary participation was given to the teachers and administrators. All surveys turned in were included in the study (see Table 1). The researcher considers the sampling a convenience sample. Convenience sampling, also known as accidental sampling, makes no pretense of identifying a representative subset of a population. It takes people or other units that are readily available or that arrive on the scene by mere happenstance.

Table 1

*Chart of Possible and Actual Participants*

Name of School	Total Number of Teachers	Actual # of Participants
Brookside Elementary	23	15
Anna Hause Elementary	31	11
Palm Elementary	31	14
Three Rings Ranch Elementary	27	12
Sundance Elementary	30	16
Tournament Hills Elementary	25	13
Mountain View Middle	24	10
San Gorgonio Middle	32	23
Beaumont High (ELA and Math only)	42	28
Total	265	142

**Human Subjects Considerations**

The study was conducted in accordance with regulations and guidelines established by Pepperdine University's Institutional Review Board (IRB) in compliance with the U.S. Code of Federal Regulations, DHHS (CFR), Title 45, Part 46 (45 CFR 46) titled Protection of Human Subjects, and parts 160 and 16 (Pepperdine University, 2005). An exempt review process was applied for through the IRB because this study presents a minimal risk to participants.

Approval for participation was obtained from the school district superintendent or designee, assistant superintendant of instructional support services (see Appendix C). An

introductory page of the SoCQ, in the form of a letter, informed participants about the study and requested their voluntary participation. This letter explained procedures, the purpose, and confidentiality of the survey in accordance with the ethical principles for human research protections. The researcher also included information about copyright laws in the use of the instrument for the proposed study and permission to use CBAM SoCQ from the copyright holders. The survey was distributed at staff meetings at each of the schools.

### **Instrumentation**

The Stages of Concern Questionnaire (SoCQ) produces a *concerns profile*, which indicates an individual's concern level at a fixed time and about a specified educational innovation. The individual's concerns are then coded and used as group data to inform the researcher. A composite profile is generated after administering the SoCQ and can provide useful insights into education adoption of the innovation (see Appendix A and Appendix D). The SoCQ can also be used as one tool to inform and guide decisions that affect teacher development programs related to the adoption of an innovation.

The SoCQ was developed for a diagnostic purpose only. Concerns should not be thought of as good or bad, but simply as informative. For example, teachers at management level of concern (Stage 3) are not better or more advanced than those at the informational level (Stage 1). It simply means that each teacher has different kinds of questions he or she needs answered and have specific needs of professional development. Additional open-ended questions were added at the end of the questionnaire. They were as follows:

1. What barriers, if any, are preventing you from fully implementing RtI?
2. What do you need (resources, training, etc.) from the district to assist you in implementing RtI?

Although generic in nature, the type of innovation and rationale for completing the questionnaire can be personalized on the questionnaire, as it was in this study. The term *innovation* was replaced with *Response to Intervention*. Writers of the SoCQ caution potential questionnaire administrators not to alter the SoCQ as it might invalidate the scoring and norming standards and result in reliability and validity problems. Based on this information, the researcher chose not to make changes to the questionnaire.

The questionnaire package that was given to teachers included a cover letter (Appendix C), the introductory page and 35-item questionnaire (Appendix D), and three additional open-ended questions (Appendix E). Teachers needed approximately 15 minutes to complete the entire questionnaire. The questionnaire used a seven-point Likert scale. The “0” indicated that the questionnaire statement was irrelevant to that participant. George et al. (2006) developed a detailed manual measuring stages of concern about innovation. It details the procedures for administering and scoring the questionnaire. The CBAM questionnaire was expected to take approximately 15 minutes to complete and the additional questions were expected to take an additional 10 to 15 minutes. The answers to the open-ended questions were coded to capture themes in the responses of the participants.

The study was administered using the established theory of the concerns-based adoption model (CBAM). An important component of CBAM is the ability to provide “a tool that can be used for introducing change and monitoring its implementation” (Hord

et al., 1987, p. 8). With the implementation of a new innovation, the CBAM model assists in understanding and coming to terms with the various concerns users experience as the change takes place. This information helps administrators identify and recommend specific training to improve the implementation. The CBAM component, SoCQ, was well suited for this study.

### **Reliability and Validity**

The validity of the CBAM model is well researched. Originally it was researchers at the Research and Development Center for Teacher Education who undertook three separate studies using over 5,000 teachers to conclude that the SoCQ is a reliable and valid measure of teacher concerns (George et al., 2006). George et al. later established that there was a high and consistent internal reliability. The SoCQ contains five items for each stage of concern; five items representing each stage on the questionnaire are designed to improve internal reliability. The validity of the SoCQ was established over 2 years of research with intercorrelation matrices, judgments of concern based on interview data, confirmation of expected group differences, and changes over time, according to George et al. The items of the SoCQ focused on the respondent's current job roles, familiarity with the implementation, and personal feelings regarding the implementation of RtI.

The SoCQ was scored by adding the responses to the five items comprising each stage. This total was the raw stage. Percentile tables incorporated in the SoCQ instrument convert the raw scores by stage to percentiles (see Appendix F). SoC profiles were derived from the percentile figures, identifying the teachers' stages of concern and the relative importance of other concerns (Hall et al., 1973).



## Procedures

Participants in this study were asked to respond to a survey. As noted before, the Concerns-Based Adoption Model (CBAM), specifically the Stages of Concern Questionnaire (SoCQ) is the instrument that was used. The Beaumont Unified School District administration gave the researcher permission to conduct the proposed study at all school sites within the district. The study was completed using the following procedures:

1. All teachers at all schools (ELA and Math at High School) were invited to participate in the study. All potential participants were given a written invitation to attend a meeting to explain the study and their voluntary participation in the study. This letter was given to the teachers prior to the meeting so that the teachers had the opportunity to review the purpose of the study and their voluntary participation.
2. At the meeting, the researcher described the study, gave directions for completion of the survey, and informed teachers of how to contact the researcher for information on the results of the survey after the study completion.
3. The teachers and administrators were given a participation packet that included a letter explaining the study; the survey instrument; a description of how participants identity, privacy, and dignity would be safeguarded; and a description of how data would be secured after it was collected. The packet also included they survey instrument, a pencil, the researchers contact information, and a candy bar.

4. The teachers were given the opportunity to complete the survey at the end of the meeting or turn it into the school office within 3 days. The researcher provided a large sealed envelope to each site for collection of both completed and blank surveys. The researcher returned on the third day to collect the envelope with completed surveys.
5. Teachers did not receive monetary compensation or other preferential treatment in exchange for participating in the survey.
6. After collecting the envelopes from each site, the completed surveys were separated from the blank ones and scored. No school staff member, including administrators, handled or viewed the surveys. Data was coded by the researcher and analyzed.
7. Completed surveys, blank surveys, scoring sheets, profiles, and data analysis sheets were stored in a locked two drawer, fire-proof file cabinet in the researcher's home to which only the researcher has access. They were stored there for 3 years from the date of the data collection. The researcher was the only person with access to these items. They will be destroyed by shredding after 3 years.

### **Human Subject Considerations**

This study complies with all federal and professional standards for conducting research with human subjects. The researcher applied to the IRB for an expedited review process. This method was chosen because the study presented minimal risk to the participants, as outlined in Appendix B of the Investigator's manual found on the Pepperdine website (Pepperdine University, 2011). The research was limited to a small

group and the use of a survey instrument. The formal application for IRB approval was submitted to the chairperson of the Graduate and Professional School, IRB for Pepperdine University. Upon review of the application all requirements were met and exemption was granted.

### **Data Analysis**

Scoring the questionnaire required calculating raw scores for each of the seven stages or scales, locating the percentile score for each scale in a table, and plotting the results on the Stages of Concern Profile Chart. The researcher used a computer program to perform these tasks. The analysis program was included in the CBAM manual. Additionally the researcher hand scored some of the questionnaires to verify the computer output, as recommended by the authors.

The questionnaire consists of 35 statements, each expressing a certain concern about the particular innovation. Respondents indicate the degree to which each concern is true for them by marking a number on a scale of 0 to 7 next to each statement. High numbers indicate high concern, low numbers indicate low concern, and 0 indicates very low concern or completely irrelevant items.

The statements were carefully selected according to the concerns theory to represent the seven fundamental stages of concern. There are five statements for each stage. The open-ended questions were carefully analyzed by the researcher and coded to capture themes in the responses of the participants.

### **Researcher Bias**

When the analysis of research data is influenced by the preconceptions of the researcher, researcher bias can exist (Maxwell, 1996). In this study the researcher had

recently been a member of the management team of the district participating in the study up. The researcher had a pre-existing relationship with the participants. Due to the possibility of researcher bias, the researcher remained aware and cognizant of researcher bias throughout the length of the study. In addition, the researcher attempted to minimize the effects of researcher bias by understanding how the prior experiences and preconceptions may influence participants during the survey and additional questions process, as well as during the data analysis, according to Maxwell.

### **Summary of the Methodology**

This study used a descriptive quantitative methodology. The researcher used a descriptive design because the study attempted to identify the characteristics of a phenomenon. Leedy and Ormond (2005) state, “descriptive research examines a situation as it is. It does not involve changing or modifying the situation under investigation, nor is it intended to determine cause-and-effect relationships” (p. 179). The methodology used can be further described as survey research. Some researchers use the term *survey research* to refer to almost any form of descriptive, quantitative research (Gay & Airasian, 2003). Leedy and Ormrod (2005) use a more restricted meaning, described as follows:

survey research involves acquiring information about one or more groups of people, perhaps about their characteristics, opinions, attitudes, or previous experiences, by asking them questions and tabulating their answers. The ultimate goal is to learn about a large population by surveying a sample of that population; thus, we might call this approach a descriptive survey or normative survey. (p. 183)

In this study, the researcher attempted to identify the extent of implementation of RtI as perceived by teachers, as well as identify barriers and supports needed to further the implementation, as determined by teachers.

After an extensive review of the literature, the researcher formulated the research questions, chose an appropriate survey instrument, identified the population, collected the data, and then tabulated results for this descriptive research study. The researcher then examined the data obtained in response to each of the stated research questions. The goal was to analyze and understand the perceptions, acceptance, and stages of teachers concern related to the processes and training at a K-12 district, as it was introduced, developed, and implemented RtI.

## Chapter 4: Results

This chapter presents the research findings for this study. Survey responses and analyses are presented to support the research questions. The SoC profiles with corresponding analyses are provided for the total population surveyed. Quantitative and qualitative analyses of the SoC responses are provided.

### Questionnaire Subjects

The subject population for this study was Beaumont Unified School district teachers who were employed by the district at the time the survey was distributed. The teachers were invited to participate in the study. Participation was voluntary. High school English and math teachers were the only teachers invited to participate at that level. The researcher attended a staff meeting at each of the schools to invite participation and explain the survey. There were 265 teachers invited to participate, with 142 surveys returned. All surveys returned were considered valid and included in the analysis.

Tables 1 and 2 show the number and percentage of actual teachers in the district and number of responses received. The elementary teachers make up more of the teacher population than the secondary teachers, but the actual percentages of responses for each group were very similar. Overall there was an approximate 53% response rate. This was lower than anticipated, but may have been caused by several factors. One possible factor affecting the number of responses may be that the survey was administered close to the end of the school year, when many mandatory activities are occurring, which likely caused additional time pressure for teachers.

Table 2

*Percentages of Responses by Grade Level*

Level	% Teachers by Level	% Responses by Level
Elementary K-5	63%	57%
Secondary 6-12	23%	43%

**Findings From the CBAM SoCQ**

After the SoCQ had been collected and processed, the data was interpreted by different methods. The first form of interpretation used was to identify the highest stage score, or Peak Stage Score Interpretation. Examining both the highest and second highest stage scores makes a more detailed interpretation possible. A Profile Interpretation analyzes the complete profile and allows for the most sensitive interpretation of respondents' concerns. Examining the percentile scores for all seven stages results in (a) a rich clinical picture and (b) interpreting the meanings of the highs and lows of the stages and their interrelationships (George, Hall, & Steigelbauer, 2006).

**Research question 1.** What is the composite Stages of Concern Questionnaire (SoCQ) profile of selected teachers in regard to the overall perceptions and level of acceptance by the user in the implementation of RtI as measured by the SoCQ from CBAM? The findings are:

1. Stages 0, Awareness, and Stage 3, Management, were high and within 2% percentile rankings of each other.
2. Stage 1, Information, and Stage 2, Personal, were almost equal.
3. Stage 4, Consequence, Stage 5, Collaboration, and Stage 6, Refocusing, were the lowest scores.

4. The composite profile is not a good match to either a nonuser or advanced user of an implementation.
5. Mixed concerns among Stages 0 Awareness, 1 Information, 2 Personal, as well as mixed concerns among Stages 3 Management, 4 Consequences, 5 Collaboration, and 6 Refocusing, indicate that there is a varying degree of implementation across the district.

The group data used for analysis of this question is displayed in Table 3. The table shows for each stage the number of individuals whose peak score was at that stage. This method provides a concise display of the distribution of peak stage scores within a group. Interpretation of the peak score is based directly on the Stages of Concern About an Innovation definitions displayed in Appendix G. The percentile score indicates the relative intensity of concern at each stage. The higher the score, the more intense the concerns are at that stage. The lower the score, the less intense the concerns at that stage (Hall et al., 1979, p. 32).

Table 3

*Frequency of Highest Concerns Stage for Individuals*

Teachers	Highest Stage of Concern							Total
	0	1	2	3	4	5	6	
Number of teachers	36	19	20	33	10	18	6	142
Percent of teachers	25.4	13.1	14.1	23.2	7	13	4.2	100

Interpretations of the cumulative teachers' sample profile percentiles were derived from the SoCQ and the SoC theoretical framework (Loucks et al., 1998). In Figure 3,

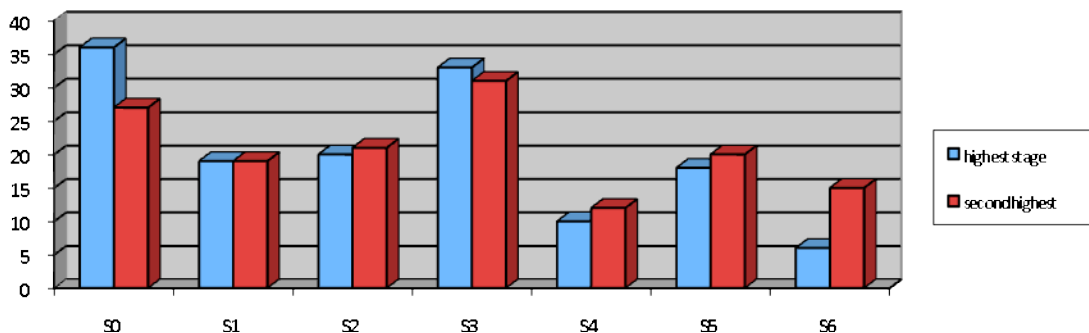


Stage 0 and 3 were high and within 2% of each other, while Stages 1 and 2 were lower, but very close. Stage 4, 5, and 6 scores were lower still.

Stage 0 (Awareness) scores are indicative of the degree of priority the respondent placed on the innovation. Stage 0 does not provide information about whether the respondent was a user or nonuser of the innovation; it does address the degree of interest in and engagement with the innovation in comparison to other tasks, activities, and efforts of the respondent. The higher the Stage 0 score, the more the respondent is indicating that there are a number of other initiatives, tasks, and activities that are of concern to him or her in addition to the implementation of RtI that is being observed in this study. This may indicate the innovation is not the only concern the respondent has currently (Loucks et al., 1998). The high Stage 0 (Awareness) score may indicate either “experienced users more concerned about things not related to the innovation, or nonusers who are just becoming aware of the innovation” (Loucks et al., p. 53).

A high score in Stage 1 (Informational) indicates the respondent would like to know more about the innovation. People who score high in Stage 1 are not concerned about details, but want fundamental information about what the innovation is and what it will do. These concerns focus on the structure and function of the innovation. This score indicates whether they want to know more about the innovation, not how much knowledge or understanding respondents have. A high Stage 2 (Personal) score deals with self concerns. Respondents are most concerned about status, rewards, and what effects the innovation might have on themselves as teachers. Because Stage 1 and Stage 2 concerns were so close in score totals, a possible interpretation is that the employees were primarily concerned with the personal effect of the innovation and less interested in

understanding the innovation itself. A high Stage 3 (Management) score indicates intense concern about management, time, and logistical aspects of the innovation. Issues related to efficiency, organizing, managing, and scheduling dominate.



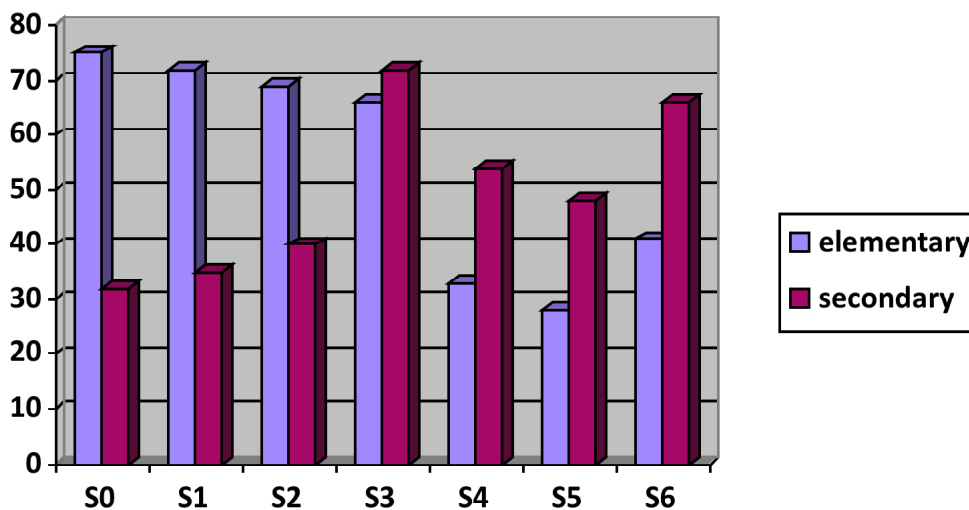
*Figure 3.* Frequency of second highest scores.

To develop additional insight into the dynamics of concerns, the second highest stage score is analyzed. Figure 3 shows the comparison between the first highest and second highest scores. The analysis of the second highest scores indicated that Stage 3 (Management) and Stage 0 (Awareness) were the highest, consistent with the highest score analysis. Stage 1 and Stage 2 concerns were almost equal, similar to the highest score analysis.

**Research question 2.** What are the overall perceptions and the level of acceptance of selected BUSD teachers in regard to the implementation of RtI related to selected demographic characteristics of the teachers, as measured by the SoCQ from CBAM, with respect to job location (elementary site or secondary site)? The findings were:

1. The elementary group perceived themselves at the initial stages of implementation and innovation acceptance.
2. The secondary group perceived themselves at the advanced stages of implementation and innovation acceptance.
3. The elementary group had high concerns in Stages 0 Awareness, 1 Information, and 2 Personal.
4. The secondary group had high concerns in Stages 3 Management, and 6 Refocusing.
5. A tailing-up in Stage 6 Refocusing, with high concerns in Stage 1 Information, and 2 Personal, of the elementary group is an indication of a resistance to the innovation or implementation.
6. The high concern in Stages 3 Management and 6 Refocusing in the secondary group indicate frustration with unresolved management concerns while having strong ideas about how to change the innovation.

For this analysis, the sample population was divided into two groups: (a) elementary sites and (b) secondary sites. The first group consisted of a total of 81 elementary teachers; the second group consisted of 61 secondary teachers. SoC were calculated for each group, and comparisons of each group profile are shown in Figure 4.



*Figure 4.* Percentile ranks of SOCQ group profiles for elementary and secondary.

A comparative analysis of the groups' percentile rankings in the graph shows the elementary group to have high concerns in Stages 0, 1, 2 and 3; while the secondary group has high concerns in Stages 2, 3, 4, and 6. The elementary group profile is indicative of a nonuser, due to high concerns in Stages 0 to 3. This profile shows the group is not fully aware of the innovation and is somewhat more preoccupied with other concerns. Stages 1 and 2 are also high, indicating that the group is interested in learning more about the innovation. The group also shows significant Management concerns with Stage 3 also high. The group is not intensely concerned about the innovation's consequences for students or for collaborating with others (low intensity on Stages 4 and 5). Hall et al. (1988) states the following:

Stage 6 concerns' tail-up infers that the group has ideas that they see as having more merit than the proposed innovation. The Stage 6 tailing-up needs to be only 7 to 10 percentile points to be detectable in terms of the overall concerns of the

individual. Thus any tailing-up of the Stage 6 concerns on a nonuser profile is a warning that the respondent might be resistant to the innovation. (p. 42)

The secondary concerns profile shows multiple peaks with high Stage 3 and Stage 6 scores. This group has intense Management concerns (Stage 3) but also has strong ideas about how the change process should be different (Stage 6: Refocusing). Hall (1988) infers that a group with high Stage 3 and 6 and low Stage 0 to 2 may have become frustrated with not having Management (Stage 3) concerns resolved and have developed strongly held ideas about how the situation should be changed. The high Stage 6 score indicates that the group has ideas about how to change the innovation or situation from their point of view (p. 54).

**Research question 3.** What other issues or concerns are seen as significant to the selected BUSD teachers, as determined by the responses to the open-ended question section of the SoCQ from CBAM? The findings were:

1. The highest percentage of issues, 35%, was in reference to time and schedules.
2. 20% of responses stated the lack of staff as a barrier.
3. 42% of responses stated a need was for more staff.
4. 25% of responses stated the lack of training was a barrier.
5. 33% of responses stated a need was for more training.
6. 42% of responses stated a need was for more coaching with feedback.
7. 12% of responses stated the lack of communication of expectations from the district office was a barrier.
8. 25% of responses stated politics and union issues were barriers.
9. 4% of responses stated that a need was for more teacher control.

10. Elementary teachers had more perceived barriers and needs than secondary teachers.

According to the SoCQ guidelines, a section was included with open-ended questions. The following questions were asked:

- What barriers, if any, are preventing you from fully implementing the innovation (RtI)?
- What do you need (resources, training, etc.) from the district to assist you in implementing the innovation?

One hundred and ten of the total survey respondents ( $N = 142$ ) contributed to this section of the SoC. Some subjects provided multiple comments, and all responses were included in answering this research question. Tables 4 and 5 provide a summary of responses to the open-ended questions grouped by barriers and needs.

Table 4

*Summary of Responses*

Barriers	# of Resp.	% of Resp.	Needs	# of Resp.	% of Resp.
Available time / current schedule	36	33%	More staff	46	42%
Lack of training	28	25%	Coaching / feedback	45	42%
Lack of staff	22	20%	Training	36	33%
Communication of expectations from DO	13	12%	Materials	13	12%
Student behavior	9	8%	Smaller class size	13	12%
Politics / union issues	28	25%	More teacher control	5	4%

Table 5

*Summary of Responses by Subgroup (Elementary and Secondary)*

Barriers	# of Responses From Subgroups	Needs	# of Responses From Subgroups
Available time / current schedule	17 elementary 19 secondary	More staff	41 elementary 5 secondary
Lack of training	19 elementary 9 secondary	Coaching / feedback	20 elementary 25 secondary
Lack of staff	19 elementary 3 secondary	Training	27 elementary 9 secondary
Communication of expectations from district office	13 elementary 0 secondary	Materials	13 elementary 0 secondary
Student behavior	9 elementary 0 secondary	Smaller class size	12 elementary 1 secondary
Politics / union issues	6 elementary 22 secondary	More teacher control	5 elementary 0 secondary

Thirty-six respondents mentioned available time and current schedule as barriers.

All responses related to time stated that there was not enough time to fully implement RtI. The inflexibility of schedules was also stated in relation to needing more time for implementation. Twenty-eight respondents mentioned lack of training in RtI was a barrier to their implementation. This corresponded with 36 respondents requesting more training as a need to implement RtI. Twenty-eight respondents stated union issues and politics as a barrier to implementation. This connects to the five respondents that stated the need for more teacher control and smaller class size. Both of these are perceived as union issues. Twenty-two respondents stated a lack of staff was a barrier. Among these responses, six responses specifically state the lack of classified (instructional aides) as a barrier. This connects to 46 respondents stating more staff was a need, and three

specified classified support. Thirteen respondents stated communication from the district office was a barrier. Feedback, vision, and expectations were given as examples of communication that was missing. Nine respondents stated student behavior as a barrier to implementation. One respondent stated student behavior due to students placed in the wrong classes caused behavior issues; one respondent stated that student behavior issues were a result of increased class size due to the implementation of RtI.



## **Chapter 5: Summary, Conclusions, and Recommendations**

This chapter provides a summary of the research, presents conclusions based on the findings reported in Chapter 4, and provides recommendations for additional research. The purpose of this study was to identify the perceptions and level of acceptance, as measured by the CBAM SoC, of selected Beaumont Unified teachers toward the implementation of Response to Intervention (RtI).

### **Statement of the Problem**

Identifying struggling students is not a difficulty for teachers; knowing what to do next, as intervention, is the hard part. It is difficult for teachers to offer intensive instruction for students who need extra help, while managing the needs of all their students. This directly leads to the need for good training on the implementation of RtI.

The Beaumont Unified School District (BUSD) mandated the implementation of RtI in order to better meet the needs of all district students. The district administration therefore had a vested interest in the implementation of RtI. To improve the chances of successful implementation, ongoing training and professional development are needed to accompany the implementation. In order to continue to provide professional development for our teachers, we need to know exactly where they are in the process of implementation, what their concerns are, and what they need in future training. Based on the Concerns-Based Adoption Model (CBAM) research conducted at the Research and Development Center for Teacher Education (RDCTE) at the University of Texas at Austin (Hall et al., 1973), the teachers and administrators of Beaumont Unified School District (BUSD) were anticipated to have various concerns about the implementation of RtI and its associated professional development. These concerns are different for each

individual, based on that individual's experience, attitude, and perceptions. Individual concerns were coded and used as group data to inform the district of its needs for professional development. This professional development will be based on the users' knowledge of, and concerns about, the implementation of RtI.

The concerns of the BUSD teachers and administrators in regards to the implementation of RtI and the professional development associated with it had not been formally identified prior to the present study. Two years into the implementation of RtI, the district administration was not sure how effective the implementation of RtI had been. The Stages of Concern (SoC) component of the Concerns-Based Adoption Model (CBAM) provides an appropriate method for identifying teachers concerns.

Therefore, the problem was to identify the users' perceptions, levels of acceptance, and satisfaction during the implementation of RtI in a K-12 unified school district in southern California, as measured by the Stages of Concern Questionnaire (SoCQ) from the Concerns-Based Adoption Model (CBAM), designed to assess individual attitudes toward the preparation and training provided to teachers.

### **Purpose of the Study**

The purpose of this study was to identify the perceptions, concerns, and level of acceptance of teachers in the Beaumont Unified School District toward the implementation of RtI, in order to provide more effective professional development in the future.

### **Recap of the Study**

**Research setting.** The implementation of RtI began in BUSD at the beginning of the 2009 school year. The change was a shift in how the district operated. The changes

in instructional practices and culture of the district were significant. To truly implement the change and have the intended outcome for students, teachers needed to be properly trained and internalize the change. Some training for teachers was done, and policies and practices were adjusted to match the structure of RtI.

Many ongoing issues, as those evident from the SoC responses and results, still exist as barriers. While change initiatives can be implemented by the administration in a public school district, such change will not necessarily be accepted or instituted by the population most affected or most responsible for the overall success of the implementation. By gaining additional insight and a better understanding of the concerns of Beaumont teachers in relation to the implementation of RtI, district administration can use the information to assist them in creating and applying effective professional development.

**Research instrument and population.** The Concerns Based Adoption Model Stages of Concern (CBAM-SoC) was used to measure the attitudes and perceptions of teachers during the implementation of the RtI model. The Stages of Concern Questionnaire (SoCQ), including open-ended questions, was distributed to teachers. The SoCQ was developed for use in educational environments, so there were no modifications to it. A written and verbal explanation of the term for the innovation (RtI) was given to the teachers. The reliability and validity of the original instrument was retained because no modifications were made.

A sample of 265 teachers in Beaumont Unified School District was selected for the individual SoCQ. The SoCQ was distributed to elementary and secondary teachers at High School only ELA and math. Completion and return rate for the SoCQ was 54%

(142). Forty-two percent (110) of those valid responses also contributed to the open-ended question section of the questionnaire.

### **Discussion of Findings**

Chapter 4 presented the findings for the three research questions in accomplishing the following: (a) determine the SoC for the entire sample population of teachers; (b) determine the differences in SoC between the subgroups, based on site location of teachers (elementary or secondary); (c) interpret the responses to the open-ended questions of the SoCQ. The SoCQ Raw Score Percentile Conversion Chart (Appendix H) and the SoCQ Quick Scoring Device (Appendix I) provided the statistical framework for determining individual and group SoC profiles (Loucks et al., 1998).

Responses to the open-ended questions section of the SoCQ provided a more subjective qualitative assessment of teachers' concerns. The qualitative analysis and subsequent interpretation of the responses overall provided an opportunity for the researcher to further comprehend the quantitative SoC data.

**Question 1.** The composite SoC profile did not show a typical “nonuser” or “experienced user” profile (Loucks et al., 1998). The highest levels of responses were in Stage 0 (Awareness) and Stage 3 (Management). Although lower, there were also significant levels of concern in Stage 5 (Consequences) and Stage 6 (Refocusing). Stage 1 (Information) and Stage 2 (Awareness) were significant and almost equal, implying that teachers were almost equally concerned with the personal impact of the implementation as they were with understanding the innovation itself. The intense level of concern in both early stages (0, 1, 2, 3) and later stages (4, 5, 6) reflect a significant discrepancy in understanding and implementation of RtI across the district. While this may be

interpreted as typical in a district-wide implementation of a new initiative, after more than 2 years of implementing RtI, these results indicate a need for additional efforts by the district in order for the effort to be successful.

**Question 2.** The SoC profile for the elementary group and the SoC profile for the secondary group were significantly different from each other. The elementary profile showed a significant intensity of concern in Stage 0 (Awareness), Stage 1 (Information), Stage 2 (Personal), and Stage 3 (Management), consistent with a nonuser or beginning user profile. Tailing-up in Stage 6 (Refocusing) demonstrates a resistance to implementation. In contrast, the secondary profile showed a significant intensity of concern in Stage 3 (Management), Stage 4 (Consequence), Stage 5 (Collaboration), and Stage 6 (Refocusing), consistent with an advanced user profile. The secondary profile displayed a typical double-peak user profile of high Management Concerns with Refocusing (Ideas). This combination reflects a concern with management of the implementation (scheduling, logistics) and concerns of exploring new ways to improve the implementation. This may represent frustration related to (a) teachers not getting resolutions, (b) management details from administration, and (c) a desire to suggest solutions. The difference between the two subgroup profiles supported the inconsistent findings in the composite profile addressing research question 1. These findings display a need for the district to provide more support to both subgroups.

**Question 3.** The responses to the open-ended question section were analyzed to show both barriers and needs specific to each subgroup. The subjective interpretation of results provided insight and clarity to the discrepancy in profiles from research question 1 and research question 2.

The evaluation of responses showed more perceived barriers and needs from elementary teachers than from secondary teachers. This supports the findings for research question 2, and explains the composite profile in research question 1.

Elementary teachers perceived a lack of staff (both credentialed [teacher] and classified [assistants]), lack of time, and lack of training as the greatest barriers to implementing RtI. They also stated their greatest needs were more staff, more time, and more training. Responses addressing a need for more teacher control in instructional matters, and specifically more teacher control in RtI, supports the possibility of resistance to the implementation that was also implied in the SoC profile in research question 2.

Secondary teachers perceived issues involving amount of time and scheduling and political and union issues as barriers to the implementation of RtI. Responses about time and schedule were different from secondary than elementary in that the secondary wording mentioned “existing schedule,” inferring the possibility of a solution, where the elementary wording inferred a more permanent problem. Secondary responders were concerned with negative comments from union leader colleagues that interrupted the implementation. One respondent stated, “union representatives lack knowledge of RtI and their negative comments are my only barriers.” Secondary respondents stated the need for more coaching and feedback related to strategies that support the implementation of RtI as the greatest need. These responses suggested feedback and expert coaching to be welcomed and needed. This can be interpreted as the opposite desire of the elementary teachers to have more control over the implementation.

## Conclusions

Based on the findings, the following conclusions were drawn:

1. The SoC profiles categorized the elementary teachers as a nonuser group with a tendency of resistance towards the ongoing implementation of RtI. Therefore, it is concluded that targeted support for elementary teachers reviewing the basic understanding of RtI is necessary. The elementary teachers need a more comprehensive understanding of the fundamentals of RtI, in order to change the culture and achieve the second order change necessary to implement RtI.
2. The SoC profiles categorized the secondary teachers as farther along in the implementation of RtI, with significant concerns about management and logistic details. It is therefore concluded that in order for the secondary teachers to continue implementing RtI, and deepen its effectiveness, basic management issues must be resolved. Based on the findings, it can also be concluded that the secondary teachers would benefit from ongoing coaching and feedback. The secondary teachers showed great support for a coaching model in both their answers to open-ended questions and in their concerns on the survey.
3. The perceived differences in implementation between the elementary and secondary levels are negatively impacting the implementation of RtI. This leads to the conclusion that conversations between the levels needs to occur, in order to bridge the understanding and belief systems of both levels. Both levels could benefit from conversations on success and concerns within their levels. This would also help build the level of trust among the teachers, a first needed step to establishing coaching experts within their own levels.

### **Recommendations for Beaumont Unified School District**

Based on the findings, the researcher recommends the following for practice and policy:

1. Recommend the BUSD use the Concerns Based Adoption Model approach for all ongoing and future innovation adoptions and implementations. The district administration could benefit by using the CBAM methodology to gauge teacher readiness in terms of concerns and attitudes towards innovations as they are introduced. This could specifically be beneficial in the area of curriculum and instruction when implementing new strategies or programs. CBAM has a proven track record in (a) identifying potential roadblocks brought on by teachers' lack of information or understanding, and (b) identifying concerns as programs are initiated.
2. Monitor the continued progress of the BUSD teachers' SoC profiles. The SoCQ should be administered again at a later date to monitor the employees' Stages of Concern developmental progress. Acceptance and adoption of an innovation takes place over time; the district's continued monitoring of the teachers' perceptions and attitudes towards RtI should provide valuable information. Periodic administration would also help determine if concerns are purely related to RtI or other situations occurring in the district at the same time (e.g., budget cuts, layoff, other implementations, etc.).
3. The district would benefit from administering the CBAM Levels of Use instrument. This would help the district determine exactly what is working in the district in regards to the implementation of RtI, and why.



4. It would benefit the district to give teachers the Stages of Concern Survey at the beginning of the year, to drive the professional development and support given to teachers throughout the year, and again at the end of the year, to measure how well the professional development and support was received.
5. The district should also administer the Stages of Concern questionnaire to the site principals and assistant principals. This would provide valuable information as the teachers will be influenced by the concerns of their principals. It will also be important to debrief all the findings with the principals. Dufour (2001) also recommends principal involvement.

District administration must understand teachers' perceptions of changes taking place, because this perception—and perception is often indicative of reality—plays a critical role in RtI implementation and its impact on student success. Considering this, understanding the impact of such potentially significant change by measuring teachers' overall perception and level of acceptance is a key component in providing guidance for future implementations in other districts. This understanding can also facilitate districts' proactive monitoring of teachers' progress through the Stages of Concern and to facilitate the development of appropriate professional development to enhance the acceptance and adoption of RtI.

### **Recommendations for Further Research**

The following recommendations for future research could build on the findings of the present study, extending the body of knowledge in a useful manner:

1. Replicate this study in another school district or multiple school districts to better understand the needs of teachers in implementing RtI in order to provide targeted professional development and ultimately improve student achievement.
2. Replicate this study using the other components of CBAM. The Levels of Use (LoU; Loucks et al., 1975) CBAM component provides strategies for monitoring the use of an innovation. The LoU does not focus on the concerns or attitudes of individuals; instead it focuses on the actual use of an introduced innovation in an organization and the rate of adoption as related to employees' behaviors.
3. Replicate this study using the Innovation Configuration (IC) component of CBAM. The IC focus is the documentation of the processes involved when undergoing change and implementing an innovation (Heck et al., 1981). The IC checklist can be used to identify the components of an innovation and its variations during its implementation.

### **Reflections**

The journey to completing this study and dissertation was very interesting, informative, and re-affirming. As the journey began, I was part of the management team in Beaumont Unified School District; at its conclusion I am part of the leadership team for a private educational reform company that works with districts across the nation. Much of the work I do now is guided by knowledge gained during this journey. At the beginning of the study I predicted many outcomes; some were shown to be true, while others were far off track.

One of my greatest surprises was the difficulty teachers at the elementary level had with the implementation of Response to Intervention. Having started in the

elementary level, I was sure the idea of meeting all students' needs would be easiest for them. I couldn't have been more wrong! Although they truly saw the need to provide different strategies for students that were functioning at different levels, they could not comprehend how to do this. The second shock was how easily the middle school teachers accepted the idea and ran with it. I had guessed they would be my biggest problem! It was refreshing to see these teachers of students "in the middle" were so willing to try different approaches until they found a match.

Most re-affirming was the response of many teachers asking for more support in the form of in-class coaching. At the beginning of the journey, I knew that to truly implement RtI, much support and professional development for staff would be needed. To really guide the district in the right choices of professional development, we needed teacher input. While working in the district, the push from the teachers had always been away from coaching and in class support, especially at the secondary level. To see teachers move through the implementation process, and 2 years later ask for more expert support specifically in an in-class coaching model was exciting. I knew the research was strong around professional development being most successful when it is closest to the students in the classroom, but I also knew the concerns of teachers having some one else teach with them was strong. The company I work for now is based on three strong beliefs: (a) all students can learn, (b) success breeds success, and (c) we control the factors of success. I knew these were powerful beliefs, but I saw them evidenced through this research. This was the best realization for me, as it confirmed my true beliefs and confirmed that I had made the right decision in joining a company truly dedicated to

educational reform. The journey came to an end, but the lessons learned will continue to guide me.

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## Appendix A

### Instructions and Questions for SCQ

The purpose of this questionnaire is to determine what people who are using or thinking about using various programs are concerned about at various times during the adoption process.

The items were developed from typical responses of school and college teachers who ranged from no knowledge at all about various programs to many years' experience using them. Therefore, **many of the items on this questionnaire may appear to be of little relevance or irrelevant to you at this time.** For the completely irrelevant items, please circle "0" on the scale. Other items will represent those concerns you do have, in varying degrees of intensity, and should be marked higher on the scale.

For example:

This statement is very true of me at this time.	0	1	2	3	4	5	6	7
This statement is somewhat true of me now.	0	1	2	3	4	5	6	7
This statement is not at all true of me at this time.	0	1	2	3	4	5	6	7
This statement seems irrelevant to me.	0	1	2	3	4	5	6	7

Please respond to the items in terms of **your present concerns**, or how you feel about your involvement with **this** innovation. We do not hold to any one definition of the innovation so please think of it in terms of your own perception of what it involves. Phrases such as "this approach" and "the new system" all refer to the same innovation. Remember to respond to each item in terms of your present concerns about your involvement or potential involvement with the innovation.

Thank you for taking time to complete this task.

## Appendix B

## Statements on the Stages of Concern Questionnaire Arranged According to Stage

Item	Statement
<b>Stage 0</b>	
3	I am more concerned about another innovation.
12	I am not concerned about this innovation at this time.
21	I am preoccupied with things other than this innovation.
23	I spend little time thinking about this innovation.
30	Currently, other priorities prevent me from focusing my attention on this innovation.
<b>Stage 1</b>	
6	I have a very limited knowledge of the innovation.
14	I would like to discuss the possibility of using the innovation.
15	I would like to know what resources are available if we decide to adopt this innovation.
26	I would like to know what the use of the innovation will require in the immediate future.
35	I would like to know how this innovation is better than what we have now.
<b>Stage 2</b>	
7	I would like to know the effect of the innovation on my professional status.
13	I would like to know who will make the decisions in the new system.
17	I would like to know how my teaching or administration is supposed to change.
28	I would like to have more information on time and energy commitments required by this innovation.
33	I would like to know how my role will change when I am using the innovation.
<b>Stage 3</b>	
4	I am concerned about not having enough time to organize myself each day.
8	I am concerned about conflict between my interests and my responsibilities.
16	I am concerned about my inability to manage all the innovation requires.
25	I am concerned about time spent working with nonacademic problems related to this innovation.
34	Coordination of tasks and people is taking too much of my time.
<b>Stage 4</b>	
1	I am concerned about students' attitudes toward this innovation.
11	I am concerned about how the innovation affects students.
19	I am concerned about evaluating my impact on students.
24	I would like to excite my students about their part in this approach.
32	I would like to use feedback from students to change the program.

<b>Stage 5</b>	
5	I would like to help other faculty in their use of the innovation.
10	I would like to develop working relationships with both our faculty and outside faculty using this innovation.
18	I would like to familiarize other departments or people with the progress of this new approach.
27	I would like to coordinate my effort with others to maximize the innovation's effects.
29	I would like to know what other faculty are doing in this area.
<b>Stage 6</b>	
2	I now know of some other approaches that might work better.
9	I am concerned about revising my use of the innovation.
20	I would like to revise the innovation's instructional approach.
22	I would like to modify our use of the innovation based on the experiences of our students.
31	I would like to determine how to supplement, enhance, or replace the innovation.

## Appendix C

## Letter of Permission from School District



500 Grace Avenue, P.O. Box 187  
 Beaumont, California 92223  
 Telephone: (951) 845-1631  
 General FAX: (951) 845-2039  
 Superintendent's Office FAX: 9951-845-2319

## BEAUMONT UNIFIED SCHOOL DISTRICT

### BOARD OF TRUSTEES

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<i>Mrs. Maureen Latham</i> Assistant Superintendent Instructional Support Services	<i>Mrs. Mays Kakish</i> Assistant Superintendent Business Services

April 28, 2010

**TO:** Dr. Susan Parks  
 Pepperdine University  
 Graduate School of Education and Psychology  
 Malibu, CA

**FROM:** Maureen Latham, Assistant Superintendent  
 Instructional Support Services

(951) 232-6494

**RE: Becky Salato – Research Proposal Approval with Conditions**

The research proposal submitted by Rebecca Salato was formally approved on April 26, 2010. The only provisions are (1) all principals involved in the study must volunteer to participate, (2) the research questions not be altered without subsequent approval by the school district, (3) all employee names, work, locations, and any other identifiable information be kept strictly confidential, and (4) no students are involved in the study.

It should be noted that our local Board of Education policy requires those who conduct research within our District provide copies of all written reports of the study (e.g., dissertation) and that the study may not, in any manner, specifically identify or name the Beaumont Unified School District within any written reports and /or publications without first obtaining specific written authorization from my office. I emphasize that all names of employees must be kept strictly confidential.

If you have any questions concerning this conditional approval, please feel free to contact me.



## Appendix D

### Scoring Instruction and Forms for Stages of Concern Questionnaire

#### **Stages of Concern Quick Scoring Device**

The Quick Scoring Device can be used to hand score the Stages of Concern Questionnaire (SoCQ) responses and to plot an individual profile. It is especially useful when only a small number of questionnaires need to be processed or when computer processing is not available. By following the step-by-step instructions, the SoCQ responses are transferred to the device, entered into seven scales, and each scale is totaled. Then the seven raw scale score totals are translated into percentile scores and plotted on a grid to produce the individual's SoCQ profile.

#### **Instructions**

1. In the box labeled A, fill in the identifying information taken from the cover sheet of the SoCQ.
2. In the table labeled B on the Scoring Device, transcribe each of the 35 SoCQ circled responses from the questionnaire (raw data). Note that the numbered blanks are not in consecutive order.
3. Row C contains the Raw Scale Score Total for each stage (0–6). Take each of the seven columns (0–6) in Table B, add the numbers within each column, and enter the sum of each column (0–6) in the appropriate blank in Row C. Each of these seven Raw Scale Score totals is a number between 0 and 35.
4. Table D contains the percentile scores for each Stage of Concern. For example, find the Raw Scale Score Total for Stage 0 from Row C (“12” from the example) in the left-hand column in Table D, then look in the Stage 0 column to the right in Table D and circle that percentile rank (“69” in the example). Take the raw score for Stage 1 (“31” in the example) to Table D and locate that numeral in the left hand Raw Score Total column. Move across in the percentile table to the Stage 1 column and circle the percentile value (“98” in the example). Do the same for Stages 2 through 6.
5. Transcribe the circled percentile scores for each stage (0-6) from Table D to Box E. Box E now contains seven numbers between 0 and 99.
6. Box F contains the SoCQ grid. From Box E, take the percentile score for Stage 0 (“69” in the example) and mark that point with a dot on the Stage 0 vertical line of the SoCQ grid. Do the same for Stages 1–6. Connect the points to form the SoCQ profile.

You can now check your own scoring by using the blank profile sheet (see Appendix C). You will want to make copies of the blank scoring device before writing on it. Reproduce the data in the example by recording the original data from the completed SoCQ.

### Stages of Concern Quick Scoring Device

SoCC 075

**A**

Date: \_\_\_\_\_  
 Site: \_\_\_\_\_ SS#: \_\_\_\_\_  
 Innovation: \_\_\_\_\_

Stage 0    1    2    3    4    5    6

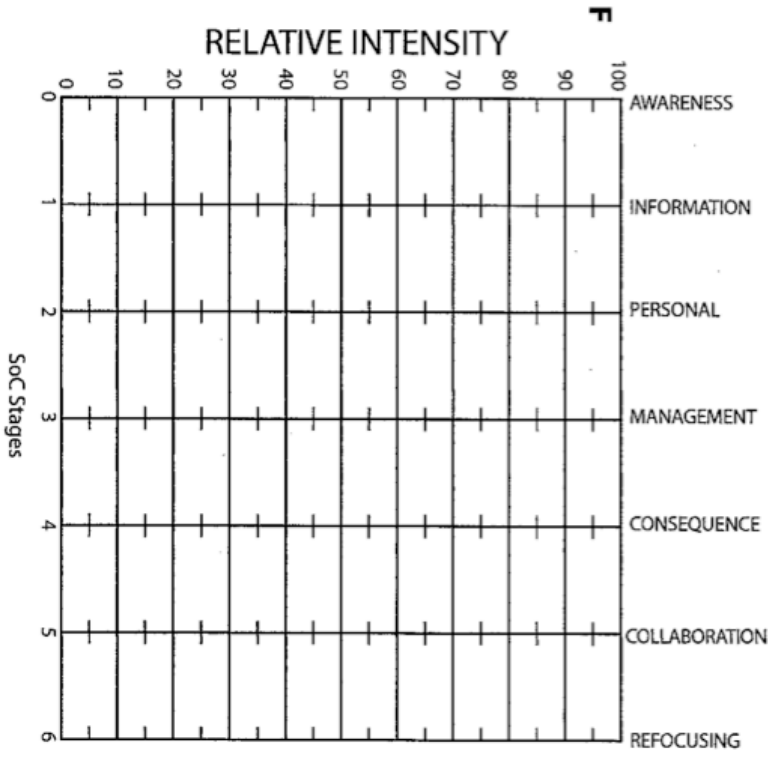
3	6	7	4	1	5	2
12	14	13	8	11	10	9
21	15	17	16	19	18	20
23	26	28	25	24	27	22
30	35	33	34	32	29	31

**C** Raw Score Totals  
**E** Percentile Scores

**D**

Five Item Raw Score	Percentiles for:						
	Stage 0	Stage 1	Stage 2	Stage 3	Stage 4	Stage 5	Stage 6
0	0	5	5	2	1	1	1
1	1	12	12	5	1	2	2
2	2	16	14	7	1	3	2
3	4	19	17	9	2	3	5
4	7	23	21	11	2	4	6
5	14	27	25	15	3	5	9
6	22	30	28	18	3	7	11
7	31	34	31	23	4	9	14
8	40	37	35	27	5	10	17
9	48	40	39	30	5	12	20
10	55	43	41	34	7	14	22
11	61	45	45	39	8	16	26
12	69	48	48	43	9	19	30
13	75	51	52	47	11	22	34
14	81	54	55	52	13	25	38
15	87	57	57	56	16	28	43
16	91	60	59	60	19	31	47
17	94	63	63	63	21	34	53
18	96	66	67	66	24	40	57
19	97	69	70	73	27	44	60
20	98	72	72	77	30	48	65
21	99	75	76	80	33	52	69
22	99	80	78	83	38	55	73
23	99	84	80	85	43	59	77
24	99	88	83	88	48	64	81
25	99	90	85	90	54	68	84
26	99	91	87	92	59	72	87
27	99	93	89	94	63	76	90
28	99	95	91	95	66	80	92
29	99	96	92	97	71	84	94
30	99	97	94	97	75	88	96
31	99	98	96	98	82	91	97
32	99	99	96	98	86	93	98
33	99	99	98	99	90	95	99
34	99	99	99	99	92	97	99
35	99	99	99	99	96	99	99

Concerns Based Systems International



### Stages of Concern Quick Scoring Device

SoCQ 075

**A**

Date: May 6, 2006  
 Site: 25 SS# 6102  
 Innovation: Unified Math

Stage 0 1 2 3 4 5 6

3	1	6	6	7	5	4	1	5	2
12	1	14	7	13	1	8	11	10	9
21	2	15	6	17	4	16	19	18	20
23	4	26	6	28	5	25	24	27	22
30	4	35	6	33	2	34	32	29	31

Raw Score Totals  
 Percentile Scores

**C** 12 31 17 \_\_\_\_\_  
**E** 69 98 63 \_\_\_\_\_

**D**

Five Item Raw Scale Score Total	Percentiles for:					
	Stage 0	Stage 1	Stage 2	Stage 3	Stage 4	Stage 5
0	0	5	5	2	1	1
1	1	12	12	5	1	2
2	2	16	14	7	1	3
3	4	19	12	9	2	3
4	7	23	21	11	2	4
5	14	27	25	15	3	5
6	22	30	28	18	3	7
7	31	34	31	23	4	9
8	40	37	35	27	5	10
9	48	40	39	30	5	12
10	55	43	41	34	7	14
11	61	45	45	39	8	16
12	69	48	48	43	9	19
13	75	51	52	47	11	22
14	81	54	55	52	13	25
15	87	57	57	56	16	28
16	91	60	59	60	19	31
17	94	63	63	65	21	36
18	96	66	67	69	24	40
19	97	69	70	71	27	44
20	98	72	72	72	30	48
21	99	75	76	80	33	52
22	99	80	78	83	38	55
23	99	84	80	85	43	59
24	99	88	83	88	48	64
25	99	90	85	90	54	68
26	99	91	87	92	59	72
27	99	93	89	94	63	76
28	99	95	91	95	66	80
29	99	96	92	97	71	84
30	99	97	94	97	76	88
31	99	98	95	98	82	91
32	99	99	96	99	86	93
33	99	99	96	99	90	95
34	99	99	97	99	93	97
35	99	99	99	99	96	99

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