

2011 - 2012

Elementary

EBIS Handbook



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Effective Behavior and Instructional Support (EBIS) Overview

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How the Effective Behavior and Instructional Support (EBIS) Team Process Works In Elementary School

The EBIS team has three purposes:

1. To review school-wide behavior and academic data in order to evaluate the effectiveness of core programs.
2. To screen and identify students needing additional academic and/or behavior support.
3. To plan, implement and modify interventions for these students. Depending on each student's "response to intervention," a formal referral for special education evaluation may result.

EBIS is intended to be a structured, systematic process involving the following features and activities: 1) team membership, 2) school-wide planning, 3) planning for the 20%, 4) monthly meetings, and 5) individualizing-intensifying interventions.

Team membership: Leadership by the principal is essential. EBIS Team membership also must include classroom teachers representing grade levels, the Literacy/Title I Specialist, School Counselor, and specialists from Special Education and ELL programs.

Planning for all students (School-wide): Three times a year, in fall, winter and spring, EBIS teams review data on student performance (e.g., DIBELS, behavior referrals, attendance) in order to evaluate the effectiveness of the core programs. The EBIS model is predicated on the notion that all students can make adequate growth and that core programs should meet the needs of at least 80% of the student population. If this is not the case, the team needs to strategize to shore up the core. This means the School-wide EBIS Team must examine Core Programs, foster honest conversations about whether the core is meeting the needs of 80% of all major student populations (Race, ELL, SPED, etc). The team should then plan prevention/intervention activities that target areas which data analysis suggests need attention (e.g., professional development, re-teaching of basic skills, re-teaching school rules and expectations consistently, etc.). It is vital to have the building principal on the team to ensure that fundamental organizational decisions can be made, resources can be allocated, instructional delivery is effective, and the program is delivered with fidelity.

Planning for the 20% (Targeted groups): The lowest 20% of students at each grade level on DIBELS and/or who have other, significant academic, behavioral or attendance problems, are listed on the EBIS Group Intervention & Planning Form. This is usually best accomplished by grade level teacher teams with core members of the EBIS team assisting them. These EBIS teams choose interventions from the appropriate Standard Protocol (Reading, Math, Writing, or Behavior) for groups of students with similar needs. They also decide on what progress data to collect and the person responsible for collecting the data. Begin the appropriate EBIS Student Intervention Profile in IPAS for all students in interventions. The documents listed above are all available on IPAS. Students in intervention groups are progress monitored as defined on the appropriate protocol using grade level assessments. If a student's skill level is well below grade level, then the EBIS team may choose to progress monitor the student at his or her instructional level ***as well*** as at grade level; only grade level norms should be used in making high-stakes decisions.

EBIS 20% team meetings: Each grade level EBIS team convenes at least every 6 weeks to evaluate the progress of the lowest 20% of students at each grade level who are involved in interventions including those students who receive services through Special Education. The team reviews progress-monitoring data for each student, analyzing *aimlines* and *trendlines* (see Decision Rules for Kindergarten and Grade 1-5). Using the decision rules, one of four different decisions may be made at this meeting for each student being reviewed:

- 1) the group intervention has been successful and the student no longer needs small group instruction,
- 2) the intervention is working for the student and should be continued and monitored,
- 3) the group intervention is not working for the student and should be revised or refined; or,
- 4) the student has not made adequate progress during two intervention periods and therefore the team will proceed to the Individualized, Intensified Intervention described below.

Individualizing, Intensifying Intervention: If the student has failed to make adequate progress (see decision rules) after two interventions, additional information must be gathered in order to select an intervention that is specifically targeted to the student's needs. EBIS teams should complete the following steps:

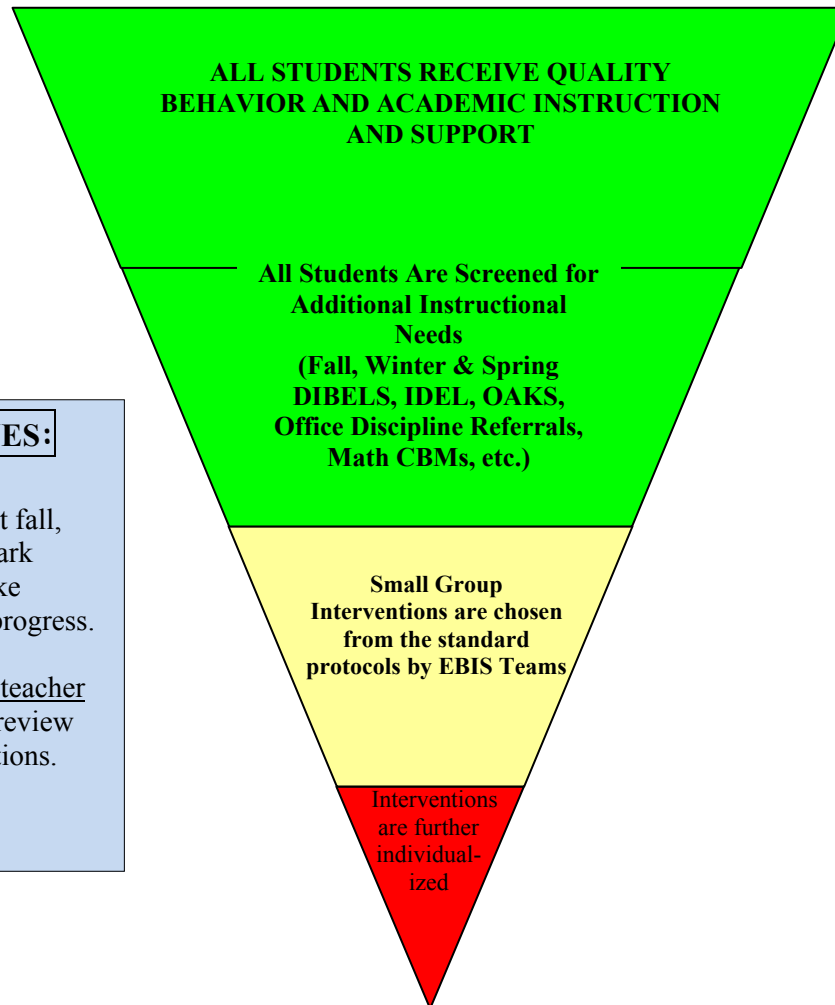
- a. EBIS Instructional Program Review Notice should be sent to parents, notifying them that the school is beginning to plan for a more individualized intervention for their student. The RTI Parent Brochure describing how the Response to Intervention process works should also be sent to parents at this time.
- b. The school counselor should complete the Developmental History, through an interview with parents.
- c. If the student is an English Language Learner (ELL), obtain information about the child's language development in comparison to the student's cohorts from the ELL teacher.
- d. Complete pages 1 through 4 of the Individual Problem Solving Worksheet. Although time consuming, this level of evaluation is necessary for only a small percentage of students. It provides detail on the student's history and is important for designing an effective, individualized intervention.
- e. Another resource for students with behavioral issues is a Functional Behavior Assessment, which can be completed by the team with support from the counselor and/or school psychologist.

Based on the Developmental History, pages 1 to 4 of the Individual Problem Solving Worksheet, ELL information, and progress monitoring data, the EBIS team will complete the Hypothesis Development section (page 5) of the Individual Problem Solving Worksheet and develop an intervention that specifically targets the student's individual needs. The team will continue to track intervention details using the EBIS Student Intervention Profile (located in IPAS) and the EBIS team will continue to monitor progress of the student.

Progress monitoring continues & after 6 weeks in the individualized intervention, the team will determine if:

- a. The student has improved substantially and no longer needs to be included in an intervention group.
- b. The student has improved substantially and the team reduces the intensity of the intervention and continues to monitor progress.
- c. The student is an English Language Learner and is struggling with **reading comprehension** in comparison with his or her ELL Cohort. The intervention designed to improve comprehension will be continued for one additional 6-week period prior to referring to Special Education.
- d. A referral for a formal special education evaluation is appropriate. Also consider a referral for special education services for students who have made progress, but the intervention has been intensive and will need to be maintained in order for the student to continue to make progress. The information from the intervention profile, progress-monitoring information, developmental history, and individual problem solving worksheet should be included with the referral as they provide evidence regarding the student's responses to various interventions. While RTI is used only for Specific Learning Disability identification, the information collected may be useful for any special education referral. See the most current Special Education Procedures Manual for details on the special education process.

EBIS Identification Process Elementary Schools Tigard-Tualatin School District, Tigard, Oregon



TEAMWORK TIMELINES:

School-wide EBIS teams meet fall, winter & spring after benchmark testing to review data and make decisions about school-wide progress.

EBIS 20% teams/Grade level teacher teams meet every 6 weeks to review data, plan and adjust interventions.

DECISION RULES:

80% Decision Rule: If 80% of students by subgroup (race, special program, grade level, etc.) are meeting benchmarks, celebrate the success of your Core Program and look for ways to improve. If less than 80% are meeting benchmark, review the Core Program.

20% Decision Rule: The lowest 20% of students at each grade level based on school-wide screening measures and/or with chronic behavior needs* will receive strategic group intervention(s)

Intensify/Change Interventions Rule: When students fail to make sufficient progress, intensify the intervention using the appropriate TTSD Standard Protocol.

Individualize Instruction Rule: When students fail to make expected progress after two (2) consecutive small group interventions gather appropriate data and move to the individual level.

Refer for Special Education Evaluation Rule: When students fail to make expected progress after one individually designed intervention.

*See Behavior Protocol

EBIS Group Interventions & Planning Form

School:		Date:		Issues														Notes				
				Check if Concerns							Check if Appropriate			Enter Scores								
Last Name	First Name	Grade	Homeroom Teacher	Behavior/Social/Emotional	Attendance	Tardies	Reading	Writing	Math	Health/Physical	Special Education	ELL	Title I	DIBELS/IDEL PSF Raw Score	DIBELS/IDEL NWF Raw Score	DIBELS/IDEL ORF (Median Score)	CBM-Other Score	Reading RIT Score	Math RIT Score	Test Window: F (1), W (2), and/or S (3)		

Changes in Intervention in Elementary Schools

Each of these changes constitutes a new intervention, and is decided upon by the EBIS team. These are the options available for academic and behavioral intervention changes.

1. Add 15 or more minutes per intervention session (ex: extra time could be used to pre-teach vocabulary or core content). Reduce group size by 2-3 students.
2. Add a behavior plan and/or attendance intervention to increase instructional time, motivation and/or attention.
3. Change curriculum according to protocol if the current intervention is not addressing the student's needs. This change should be based on additional assessment (phonics screener, core program assessment, intervention placement test, etc.).
4. Add curriculum according to protocol based on additional assessment (phonics screener, core program assessment, intervention placement test, etc.) to provide additional practice on targeted skills.
5. The team may decide that the student needs more time in the current intervention along with a refinement in the instructional delivery based on the needs of the student by increasing the intensity of the intervention. In these instances, consult your EBIS coach.

Reading

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EBIS Reading Decision Rules: Grades 1-5

Place students in the 20% group and begin weekly progress monitoring when:

Academic skills fall below benchmark and place them in the lowest 20% compared to their peers on one or more of the following measures: DIBELS, IDEL, Reading curriculum based assessments, OAKS.

- Progress monitoring data should be entered into IPAS.
- For students whose reading skills are well below grade level, the EBIS team may choose to monitor progress at the student's instructional level as well as at their grade level.
 - Only grade level data should be used in making high-stakes decisions (such as referral to special education)
 - For students already in special education, the team may determine that it is appropriate to monitor less frequently in grade level material (i.e., monthly or 3 times per year).
 - For monitoring progress at a student's instructional level, the team will select the measure that best matches the instructional content and goals, allows the student to demonstrate success with skill acquisition, and at the same time provides room for growth over time.

Change interventions when:

Progress monitoring indicates 4 consecutive data points below the aimline or if data are highly variable (points are above and below the aimline), maintain the current intervention until 6 data points have been collected, analyze aimline and trendline (IPAS calculates). Change intervention if the slope is flat or decreasing and the scores are below benchmark.

- Each time the intervention is changed the aimline is redrawn in IPAS. The aimline is created using the median of the three data points prior to the intervention change as the starting point for the new aimline.
- For English Language Learners (ELLs) who meet the above criteria, check the progress of the cohort group after each 6-week period to determine whether an individual student's progress is significantly different from the group. (See page 16 for explicit guidelines for intensifying interventions for ELLs)

Individualize interventions when:

- Progress is below the aimline for **TWO** consecutive intervention periods. Prior to selecting the individualized intervention, the EBIS team should select a case manager, complete pages one to four of the Individual Problem Solving Worksheet, complete a developmental history, and provide parents with the RTI Brochure. If the student receives ELL services, review ELL information specified on page 16. The team should meet to complete page five of the Individual Problem Solving Worksheet using the above information and select an intervention tailored to the student's specific needs.

Refer for Special Education evaluation when:

- After one highly structured, 6-week, individually designed intervention, progress continues below aimline OR the team determines that the support is so significant that the student will need continued individual and intensive instruction. If the student is an English Language Learner, see ELL information specified on page 16.

Consider Exiting students from interventions when:

- The student has three progress monitoring data points at or above the next DIBELS benchmark **and** core reading assessments and intervention assessments indicate grade-level proficiency **and** student has met the benchmark goal on OAKS (for students in grades 3 to 5).

EBIS Reading Decision Rules: Kindergarten

BEGINNING OF THE YEAR: October

Place students in strategic or intensive intervention groups by October 15th based on fall DIBELS Next/IDEL data.

- Strategic: Add 10 minutes of intervention instruction daily
- Intensive: Add 30 minutes of intervention instruction daily

Use First Sound Fluency (FSF) to progress monitor and graph progress 2 times per month for the students receiving strategic support and weekly for those receiving intensive support.

MIDDLE OF THE YEAR: January

Regroup students after January DIBELS Next/IDEL has been completed. Place students according into the following groups:

- Strategic support: Add 10 minutes of intervention instruction daily
- Intensive support: Add 30 minutes of intervention instruction daily

For students who have met the goal of 20 on Phoneme Segmentation Fluency (PSF), use Nonsense Word Fluency (NWF) to progress monitor. Monitor and graph progress 2 times per month for the students receiving strategic support and weekly for those receiving intensive support through mid April.

END OF THE YEAR: April

For those students who have been in two interventions and are still not making adequate progress, EBIS teams should complete the developmental history and pages 1 to 4 of the Individual Problem Solving Worksheet. The EBIS team will use that information to complete the Hypothesis Development section (page 5) of the Individual Problem Solving Worksheet and develop an intervention that specifically targets the student's individual needs. The team will continue to track intervention details using the EBIS Student Intervention Profile (located in IPAS) and the EBIS team will continue to monitor progress of the student.

Guidelines for Matching Interventions to Instructional Need

<p style="text-align: center;">Fast & Accurate</p> <p>Question: Are comprehension and vocabulary skills on grade level?</p> <ul style="list-style-type: none"> • Yes: continue with strong core instruction • No: build vocabulary, comprehension, and/or fluency, add language intervention for ELL 	<p style="text-align: center;">Fast & Inaccurate (less than 95% accurate)</p> <p>Question: Are the errors due to decoding or comprehension deficits?</p> <ul style="list-style-type: none"> • Yes: build decoding and/or comprehension skills • No: consider fluency intervention and/or fluency work within core instruction, add language intervention for ELL
<p style="text-align: center;">Slow & Accurate</p> <p>Question: Are comprehension and vocabulary skills on grade level?</p> <ul style="list-style-type: none"> • Yes: build fluency • No: build fluency, vocabulary, and comprehension, add language intervention for ELL 	<p style="text-align: center;">Slow & Inaccurate</p> <p>Question: Does the student have sufficient vocabulary and listening comprehension skills?</p> <ul style="list-style-type: none"> • Yes: build decoding and practice with connected text • No: use comprehensive intervention program that addresses the Big 5, add language intervention for ELL

*Fluency and vocabulary may be taught as stand-alone interventions (e.g. Read Naturally, Language for Learning) or as research-based routines embedded in the core program *and* intervention programs. All interventions must be taught *daily* and monitored. If a student is receiving more than one intervention program, sufficient time must be allotted for both.

Tigard Tualatin School District Elementary EBIS Handbook
TTSD Standard Reading Protocol

GRADE	CORE PROGRAM		INTERVENTIONS		
	TIME	CURRICULUM OPTIONS	TIME AND GROUP SIZE	CURRICULUM OPTIONS	
				Strategic	Intensive
K	60 min. daily	<ul style="list-style-type: none"> Macmillan Macmillan & Fast Track SFA-FTP 	1st & 2nd Intervention: Core + 10 minutes daily Large group, typically in the classroom 3rd Intervention: Core + a minimum of 30 minutes daily Small group	<ul style="list-style-type: none"> Ladders to Literacy PA in Young Children Road to the Code Earobics Daisy Castle Fast Track Phonics 	<ul style="list-style-type: none"> ERI for only 30 minutes Language for Learning and ERI for 45 minutes Language for Learning (in addition to reading intervention) Fast Track Phonics
1	90 min. daily	<ul style="list-style-type: none"> Macmillan Macmillan & Fast Track SFA Edmark (at the determination of the IEP team) 	1st & 2nd Intervention: Core + 30 minutes daily – small group 3rd Intervention: Core + a minimum of 45 minutes daily – small group	<ul style="list-style-type: none"> Read Naturally Triumphs Phonics for Reading Fast Track Phonics SFA Tutoring ECRI Small Group Lessons (for ECRI grant schools only) 	<ul style="list-style-type: none"> ERI only for 30 mins. (finish ERI by Dec. of 1st grade) OR Language for Learning and ERI for 45 minutes Language for Learning (in addition to reading intervention) Fast Track Phonics Reading Mastery Read Naturally Horizons
2	90 min. daily	<ul style="list-style-type: none"> Macmillan Reading Mastery Edmark (at the determination of the IEP team) 	1st & 2nd Intervention: Core + 30 minutes daily – small group 3rd Intervention: Core + a minimum of 45 minutes daily – small group	<ul style="list-style-type: none"> Triumphs Phonics For Reading Read Naturally STARS SFA Tutoring 	<ul style="list-style-type: none"> Triumphs Reading Mastery Read Naturally Language for Thinking (in addition to reading intervention) Horizons Phonics for Reading
3	90 min. daily	<ul style="list-style-type: none"> Macmillan Reading Mastery Edmark (at the determination of the IEP team) 	3rd Intervention: Core + a minimum of 45 minutes daily – small group	<ul style="list-style-type: none"> Triumphs Phonics For Reading Read Naturally STARS Reading Success REWARDS (after Jan. of 3rd grade) 	<ul style="list-style-type: none"> Triumphs Horizons Read Naturally Reading Mastery Reading Success Phonics For Reading Corrective Reading
4 and 5	90 min. daily	<ul style="list-style-type: none"> Macmillan Reading Mastery Edmark (at the determination of the IEP team) 		<ul style="list-style-type: none"> Triumphs REWARDS Six-Minute Solution Read Naturally STARS Reading Success 	<ul style="list-style-type: none"> Triumphs Reading Mastery Read Naturally Great Leaps Corrective Reading Reading Success Horizons Phonics for Reading

All students, including students with disabilities and English language learners are monitored through the EBIS process. Core and intervention decisions are made according to this protocol.

EBIS Decision Rules: Spanish Literacy

Place students in the 20% group when IDEL scores are as follows:

BEGINNING OF THE YEAR: October

Kindergarten: Phoneme Segmentation Fluency (FSF) is below 5

First Grade: Nonsense Word Fluency (FNS) is below 25

Second Grade: Oral Reading Fluency (FLO) is below 25

Third Grade: Oral Reading Fluency (FLO) is below 50

MIDDLE OF THE YEAR: January

Kindergarten: Nonsense Word Fluency (FNS) is below 10

First Grade: Nonsense Word Fluency (FNS) is below 40

Second Grade: Oral Reading Fluency (FLO) is below 40

Third Grade: Oral Reading Fluency (FLO) is below 60

END OF THE YEAR: May

Kindergarten: Nonsense Word Fluency (FNS) is below 25

First Grade: Nonsense Word Fluency (FNS) is below 70

Second Grade: Oral Reading Fluency (FLO) is below 50

Third Grade: Oral Reading Fluency (FLO) is below 65

TTSD Standard Spanish Reading Protocol

GRADE	CORE PROGRAM Time	PROGRAM OPTIONS	STRATEGIC Time & Group Size	PROGRAM OPTIONS	INTENSIVE Time and Group Size	PROGRAM OPTIONS
K	60 minutes daily	Tesoros SFA	Add 10 minutes daily Large group	*Estrellitas review * Tesoros Interventions *SFA Tutoring * El Camino	Add 30 minutes daily Small group	*Canciones a cuentos *Elefonetica *Santillana-programs * El Camino
1	90 minutes daily	Tesoros SFA	Add 30 minutes daily Small group	*Read Naturally * Tesoros Interventions *SFA Tutoring * El Camino	Add 30 minutes Small group	*Elefonetica *Santillana programs *Reading A to Z in Spanish *Reading Rods * El Camino
2	90 minutes daily	Tesoros	Add 30 minutes daily Small group	*Read Naturally * Tesoros Interventions	45 minutes of instruction daily Small group	*Read Naturally *STARS for Spanish *Repeated reading text *Reading Rods *Elefonetica *Santillana programs *Reading A to Z in Spanish
3	90 minutes daily	Tesoros	Add 30 minutes daily Small group	*Read Naturally *Phonics For Reading *STARS * Tesoros Interventions	45 minutes of instruction daily Small group	*Read Naturally *STARS (Spanish) *Repeated reading text with targeted goals
Transition	90 minutes daily *	Macmillan	* Add 15-30 minutes daily Small group	*REWARDS *Six-Minute Solution *Read Naturally *Collaborative Strategic Reading *STARS *Connections for Comp. *Reading Success	*ADD 45 minutes of intervention daily Small group	*Triumphs *Reading Mastery *Read Naturally *Great Leaps *Corrective Reading *Reading Success

* During the transition period, ELL students may need greater emphasis on vocabulary development, comprehension and specific literacy transfer skills. Consult with ELL team.

Planning for English Language Learners

Decide if the problem is an individual or group problem.

1. To what degree is the student struggling? Rate the student from 1 (minimal struggle) to 4 (serious struggle).

Area	Student	English Speakers	Cohort Group
English Language Development General		NA	
Social Language Development		NA	
Academic Language Development		NA	
Acculturation			
Reading			
Written Language			
Math			
Social and Classroom Behavior			

2. Intervene in the above areas either for the group or for the individual as appropriate. Do not wait for “language to develop” or for “acculturation to occur.” See *Intervention Approaches by Area on next page*.
- **For group Interventions:**
 - If you decide to intervene with the *group*, set up a progress-monitoring program in each area of concern. The program should involve weekly progress monitoring.
 - **For students in Individual Interventions:**
 - Monitor the student’s progress in the areas of concern.
 - For students at language level 1-3, monitor for 8 to 10 weeks. If the student’s trend line does not improve so that progress is similar to the cohort *, then the intervention should be changed.
 - For students at language level of a “high” 3 and above, use the decision rules as for English only students.

If the student does not make progress after two interventions, move to the *individualized stage*.

3. **For students who need an individualized intervention:**
- Complete, with the ELL teachers and the parents, the *Developmental History* and the *Individual Problem Solving Worksheet*.
 - Use the information from these two documents to design intervention(s) in the area of concern.
 - For students at language level 1-3, monitor for 8 to 10 weeks. If the student’s trend line does not improve so that progress is similar to the cohort, then the intervention should be changed.
 - For students at language level of a “high” 3 and above, use the decision rules as for English only students.

*Cohort Group

A cohort group is defined as at least three students with similar language levels, educational experiences, and cultural backgrounds (such as length of time in country, language in the home, language of instruction, and length of time in ELL).

Tigard Tualatin School District Elementary EBIS Handbook
Planning for English Language Learners
Intervention Approaches by Area

For English Language Development:

1. Increase the amount of practice of target language.
 - a. have teacher “require” language output by student multiple times per day
 - b. small group “talk group” w/ instructional assistant or volunteer using target language
 - c. change size of ELD group and increase opportunities for student to respond orally and in writing
2. Double dose ELD
3. Change size of ELD group.
4. Increase specificity of ELD instruction (For Example, use Language for Learning)

For Acculturation:

1. Consider how the student’s culture may cause instruction to be “out of step” with the student. For example, if the student comes from a culture where girls are expected to not speak to boys, consider this in creating groupings. If the culture emphasizes co-dependence and teamwork, de-emphasize individual grades or competitive games. Review curriculum materials for examples, pictures, and vocabulary that may cause confusion.
2. Work with the parents. Find out what the family’s expectation is for involvement in school, student independence in schoolwork, and understanding of the American school system. Increase home to school communication to help adapt the child’s educational experience to those understandings.
3. Be more explicit with the student about “how school works.”

For Academics:

1. In general, follow the district protocols for Reading, Math, and Written Language.
2. To decide if a student should have a reading intervention:
 - a. do your best to find out if the student has strong (Reading, Math, and Written Language) skills (check the record, talk to the parent, see if an adult native speaker can informally assess)
 - b. if the student has good skills in native language, place in the core
 - c. if the student does not have good skills, place in core AND start interventions.

EBIS Student Intervention Profile – READING
Can Be Completed In IPAS

Student Name: _____ Date: _____ ID Number: _____

Initial Data Information: **Initial Grade Level:** _____

Attach DIBELS Individual Student Profile and Progress Monitoring Report or IPAS Report.

Most Recent OAKS RIT Scores & %iles: (grade taken _____): R/L ___ M ___ Wr. ___ Sci. ___

ELL Language Level: _____ Math CBM Screening Score: _____

Attendance Issues: _____ YTD Absences _____ YTD Tardies _____

Behavioral Issues: _____

(If behavioral concerns, attach SWIS Individual Student Report or data on behavior plan)

Number and times of Health Room Visits in past month: _____

<u>Teacher/School</u>	
K	_____
1	_____
2	_____
3	_____
4	_____
5	_____

Intervention #1

Start Date: _____ **Current Grade Level:** _____

Targeted Skill: Phonological awareness ___ Phonics ___ Fluency ___ Compr. ___ Vocabulary ___

Curriculum (From Reading Protocol): _____

Group Size: 1-3: _____ 4-7: _____ 8 or more: _____

Frequency: **DAILY**

Duration: 10 min (K only): _____ 15 min.: _____ 30 min.: _____ 45 min.: _____ Other: _____

End Date: _____ **Attach Progress Monitoring Data**

Number of intervention sessions attended during intervention period #1 _____ **Total sessions possible** _____

Notes:

Intervention #2

Start Date: _____ **Current Grade Level:** _____

Targeted Skill: Phonological awareness ___ Phonics ___ Fluency ___ Compr. ___ Vocabulary ___

Curriculum (From Reading Protocol): _____

Group Size: 1-3: _____ 4-7: _____ 8 or more: _____

Frequency: **DAILY**

Duration: 10 min (K only): _____ 15 min.: _____ 30 min.: _____ 45 min.: _____ other: _____

End Date: _____ **Attach Progress Monitoring Data**

Number of intervention sessions attended during intervention period #2 _____ **Total sessions possible** _____

Notes:

Intervention #3

Start Date: _____ **Current Grade Level:** _____

Targeted Skill: Phonological awareness ___ Phonics ___ Fluency ___ Compr. ___ Vocabulary ___

Curriculum (From Reading Protocol): _____

Group Size: 1-3: _____ 4-7: _____ 8 or more: _____

Frequency: **DAILY**

Duration: 10 min (K only): _____ 15 min.: _____ 30 min.: _____ 45 min.: _____ other: _____

End Date: _____ **Attach Progress Monitoring Data**

Number of intervention sessions attended during intervention period #3 _____ **Total sessions possible** _____

Notes:

Reading Transition Process: Fifth to Sixth Grade

1. Gather the following data on all students scoring at or below the 35th percentile on OAKS (RIT 220 or below):
 - Latest OAKS Reading RIT score and percentile and previous year's RIT score and percentile to calculate growth.
 - DIBELS accuracy and fluency scores (median of the last 3 progress monitoring scores for students in interventions. Otherwise administer the spring DIBELS benchmark assessment to obtain this score.)
 - Average words per week growth on DIBELS from January benchmark testing to the end of April progress monitoring. (Use median of last 3 progress monitoring scores in April, subtract January benchmark score, and divide by the number of weeks between those dates.)
 - LAS/ELPA scores for ELL students
 - Current intervention curriculum
 - MacMillan unit tests or MAZE score (median of 3) for students not currently in interventions.
2. Complete the 5th to 6th Reading Group Placement Form (excel spreadsheet) with the above information for students scoring at or below the 35th percentile on OAKS.
3. Identify the students who will take the Language Placement Test based on the following criteria:
 - Are in the intensive range on DIBELS (ORF at or below 102).
 - For students not currently being progress monitored in interventions, administer the spring benchmark DIBELS assessment to obtain this score, otherwise use the median of the last 3 progress monitoring scores. **OR**
 - Are receiving Reading Mastery as their Core **OR**
 - Are scoring at the 10th percentile or below on OAKS (RIT 211). This should also include students who took the extended assessment. **OR**
 - Have an ELD level of 1.
4. Schedule Language Placement test with Reading Specialist at the middle school.
5. Complete the Individual 5th to 6th Grade Student Screening Forms
6. Bring the following data to the transition meeting
 - Literacy Specialist
 - Progress monitoring data (with aimlines/trendlines – can use IPAS)
 - Individual 5th Grade Student Screening Forms
 - Classroom Teacher
 - i. Two most recent MacMillan unit test scores
7. Other things to consider when making placement decisions are previous interventions, amount of support, current core placement, rate of growth

Reading Placement Criteria: Fifth to Sixth Grade

Class	Placement Criteria
Regular Language Arts	<ul style="list-style-type: none"> • OAKS score at or above the 36thtile
Regular Language Arts/Watch List	<ul style="list-style-type: none"> • OAKS score equal to or below the 35thtile • Fluency at or above 103 (Spring Goal for Strategic or above – 5th Grade) • Accuracy rate at or above 95% • Maze above 20 OR last two MacMillan unit tests above 70%
SOAR to Success Consider placement in Soar To Success for students who meet three of the four criteria	<ul style="list-style-type: none"> • OAKS score equal to or below the 35thtile • Fluency at or above 103 • Accuracy rate at or above 95% • Maze between 14 and 20 OR last two MacMillan Unit tests below 70%
LANGUAGE! Consider placement in Language! for students who meet three of the four criteria	<ul style="list-style-type: none"> • OAKS score equal to or below the 10thtile (RIT 211) • Fluency at or below 102 (5th grade intensive) • Accuracy rate at or below 94% • LANGUAGE! Placement Test indicating a need for A or C.

Note: For students who meet the OAKS benchmark with the minimum score, the team will review the student's past reading achievement to determine whether a reading intervention in middle school is necessary.

Fifth Grade Student Reading Screening Form
Used to Determine 6th Grade Reading Placement

Student:

Date:

School:	Grade: 5th
Classroom Teacher:	IEP / ELL / 504 / TAG

Screening Data:	
OAKS R/L RIT Score: _____	Month Taken: _____
OAKS Percentile: _____	DIBELS Accuracy Score: _____
DIBELS Median Fluency Score: Average Words Per Week Growth: _____	
MAZE Median Score (optional): _____	
Macmillan Weekly Comprehension Test % (last two): _____ / _____	Vocabulary / _____
LANGUAGE! Placement Test:	
Fluency: _____	DPR: _____ GLE: _____ Spelling: _____
ELPA Score (if Appropriate): Overall _____	Date of Test _____
Other Data:	
<input type="checkbox"/> EBIS File	Most Recent Interventions _____

Teacher Comments:

Specialist Comments:

Final Team Placement Recommendation:
<input type="checkbox"/> Watch List (begin year with no reading intervention)
<input type="checkbox"/> Soar to Success
<input type="checkbox"/> LANGUAGE! A
<input type="checkbox"/> LANGUAGE! C

Behavior

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Elementary Standard Behavior Protocol (Revised Spring, 2011)

Grade Level(s)	Universal Screening Tools	Core Program	Strategic Interventions	Intensive Interventions
K-1	<ul style="list-style-type: none"> • First Step To Success Behavior Screener • Phoneme Segmentation Fluency • Office Discipline Referrals • Attendance Reports • Suspension/Expulsion Data • School-wide Evaluation Tool (SET) • Benchmarks of Quality • School Safety Survey • Self-Assessment Survey 	<ul style="list-style-type: none"> • School Rules & Behavior Expectations Are Explicitly Taught to <u>ALL</u> Students • All Students Regularly & Consistently Acknowledged for Demonstrating Behavior Expectations • All Students Reliably Corrected When Behavior Expectations Are Not Demonstrated. Positive Behavior Expectation Re-taught & Reinforced Immediately. 	<p><i>For all interventions, baseline data must be collected and progress must be monitored and regularly reviewed.</i></p> <ul style="list-style-type: none"> • Re-Teach Expectations • Check-in Check-out Program (H.U.G. Program) • Adult Mentoring • Peer Mentoring • <i>Targeted</i> Social/Emotional/Behavioral Skills Groups, such as curriculum follow-up with Second Steps or Steps to Respect • Behavior Contracts • Parent participation in a Parent Training Program (Incredible Years) 	<p>Core + Strategic and...</p> <ul style="list-style-type: none"> • First Step To Success • Functional Behavior Assessment & Behavior Support Plans • Individualized Behavior Goals and Progress Monitoring • Care Coordination • Juvenile Court Counseling
2-5	<ul style="list-style-type: none"> • Office Discipline Referrals • Attendance Reports • Suspension/Expulsion Data • School-wide Evaluation Tool (SET) • Benchmarks of Quality • School Safety Survey • Self-Assessment Survey 	<ul style="list-style-type: none"> • School-wide Social/Emotional Curriculum Delivery (e.g., Second Steps, Steps to Respect) • Bully prevention curriculum such as Stop, Walk, Talk, or Expect Respect 	<ul style="list-style-type: none"> • Behavior Contracts • Parent participation in a Parent Training Program (Incredible Years) 	<p>Core + Strategic and...</p> <ul style="list-style-type: none"> • Functional Behavior Assessment & Individual Behavior Support Plans • Individualized Behavior Goals and Progress Monitoring • Care Coordination • Juvenile Court Counseling
<i>Who does this work?</i>	EBIS / EBS Teams First Steps To Success Staff	EBS Teams & ALL STAFF	Appropriate Staff as Determined by EBIS Teams (Principals and School Counselors and/or Psychologists direct this work)	Appropriate Staff as Determined by EBIS Teams (Principals and School Counselors and/or Psychologists direct this work)

Review the Core

- Office Discipline Referral Data reviewed monthly. If more than 1 referral per day per month for every 300 students, revisit the CORE and look for patterns in location, time, grade, type, and frequency of incidents.
- If more than 20% of all students received 2 or more referrals: revisit the CORE.
- If more than 30% of referrals occur in a specific area of the school: re-teach specific common area behavior expectations, acknowledge/reward positive behavior, & correct inappropriate behavior immediately.
- If more than 40% of referrals occur in classrooms: re-teach classroom expectations, increase professional development in classroom management strategies, and/or revisit CORE instruction in specific classrooms.

(See Page 2 for Decision Rules)

Elementary Standard Behavior Protocol: Decision Rules

(Page 2)

Decision Rules:

- K-1 Screening to identify at risk students:
 - K-1 Teacher completes “Early Screening Project” (ESP) on each student he or she believes may need behavior support.
 - Students who score in the “high-risk” or “extreme risk” range on the ESP screener are considered for participation in the First Step To Success (FSTS) program.
 - Students identified as “at-risk” or “deficit” on Phoneme Segmentation Fluency (PSF) are considered for Second Tier Reading &/or Behavior Interventions.
 - **Students who are identified as “at-risk” or “deficit” on Phoneme Segmentation Fluency (PSF) AND “extreme risk” on the ESP MUST be discussed by the EBIS team for possible referral to the First Step to Success Program.**

- K-5 Place Students in Strategic intervention if:
 - Student has two or more Office Discipline Referrals within a 3-month period.
 - If more than 5 absences in a 30-day period: EBIS team reviews data to determine appropriate interventions, which may include calls or letters to the family or a behavior support plan.

- K-5 Progress monitoring:
 - Monitor Office Discipline Referrals (ODRs) and absences.
 - Daily behavior data from First Step to Success or Check-in Check-out programs.
 - Progress on individual behavior goals or Behavior Support Plan.
 - Consider a referral to the district behavior Team if student isn’t successful with the strategic intervention (See forms on pages 28 – 30.)
 - **Student should experience success. If unsuccessful for more than three days, modify the plan. If more support is needed, consider a referral to the Behavior Support Team (See forms on pages 28 – 30.)**

- Place students in Intensive Intervention AND refer to Red Zone Team and if:
 - Progress is below the expected rate after 6 weeks of Strategic Interventions. Perform a Functional Behavior Assessment (FBA) and develop a Behavior Support Plan (BSP).
 - Student receives 6 or more behavior referrals. Perform an appropriate Functional Behavior Assessment & develop a Behavior Support Plan AND consult with the Care Coordinator and/or Juvenile Court Counselor, if applicable.
 - There is a significant concern regarding mental health issues, anti-social behavior, or serious concerns about family support.
 - Student’s behavior poses a potential risk to self or others.

All students in Intensive Interventions should have a Functional Behavioral Assessment (FBA) and Behavior Support Plan (BSP) and be referred to the “Red Zone Team.”

- **However, in some instances students might be referred to the Red Zone Team prior to initiating the FBA/BSP process, if complex mental health issues or serious concerns about family support are suspected.**

Procedures to Access Care Coordinator Services

PRIOR TO A REFERRAL

1. Teachers and staff analyze student data at EBIS team and match students to appropriate interventions using the “TTSD Behavior Protocol” decision rules.
 - a. A list of “Red Zone” students (Tier III interventions) is generated for later discussion at the “Care Team” (see Protocol decision rules to determine Red Zone students).
 - i. Any student that a teacher has mental health concerns about should be placed on this list for later discussion;
- OR-**
- ii. *if the concern must be addressed immediately, contact the Washington County Crisis Line (503.291.9111) or 9-1-1.* The Care Coordinator for your school may be accessed via cell phone for consultation concerning students with imminent mental health needs.
 2. Care Coordinators will attend your Care Team meetings and triage student concerns with you.
 - a. **If the Care Coordinator is not available when the student is discussed, please call him/her to consult before completing the referral/calling the parent about this service.**
 3. **The parent/guardian must be notified by the referring adult before a referral is generated to the Care Coordinator Program.**

REFERRAL

1. After your Care Team meeting, the referral source (e.g., teacher, counselor, administrator, etc.) fills out the “Care Coordination Team Referral Form” for the identified student.
2. The identified EBIS Case Manager and/or referral source ensures the Care Coordinator receives the referral form (fax/email/intra-district mail).
3. The care coordinator will respond to a new referral within 3 business days. More urgent referrals can be accommodated if necessary. The care coordinator will also gather any other additional information needed.
4. The care coordinator will contact the student’s parent or guardian to obtain written consent using the “Authorization to Use and/or Disclose Educational and Protected Health Information” form to:
 - a. begin working with the student and family to connect them to appropriate community mental health services;
 - b. assess the student’s needs; and,
 - c. share information between school and provider agencies
5. If the care coordinator is unsuccessful in contacting the family, the care coordinator will follow-up with the EBIS Case Manager to problem-solve.
6. The “Care Coordination Referral Notification Form,” which will be returned to the EBIS Case Manager by the care coordinator, may be placed in the student’s Cumulative Folder.
7. All other pages of the referral packet and treatment records **MUST NOT** be placed in the student’s Cumulative Folder.
 - a. These will kept in a separate treatment file by the Care Coordinator at Lifeworks NW.

Procedures to Access Care Coordinator Services

Page 2

Please contact the Care Coordinator assigned to your school or the Program Coordinator, Pam Sturtevant, to discuss process, scope of services, individual students that you're concerned about, etc. at: 971-207-7181 or the number below.

Renee Case, LCSW

Phone: 503-849-7687

Email: reneec@lifeworksnw.org

Fax: 503-431-5210

SCHOOLS

Tigard High School

Twality Middle School

Templeton Elementary

Durham Elementary

Byrom Elementary

CF Tigard Elementary

Durham Ed. Center

Greg Rush, MSW

Phone: 503-710-7186

Email: gregr@lifeworksnw.org

Fax: 503-431-5110

SCHOOLS

Tualatin High School

Hazelbrook Middle School

Bridgeport Elementary

Tualatin Elementary

Deer Creek Elementary

Alberta Rider Elementary

Metzger Elementary

Mary Woodward Elementary

Pam Sturtevant, MA

Phone: 971-207-7181

Email: pams@lifeworksnw.org

Fax: 503-431-5010

SCHOOLS

Fowler Middle School

All Spanish-speaking elementary referrals

Jose Alvarez, MA

Phone: 503-382-9624

Email: josea@lifeworksnw.org

Fax: 503-431-5610

SCHOOLS

All Spanish-speaking secondary referrals

Lifeworks NW
Care Coordination Team Referral Form

To Be Completed By Referral Source

The Care Coordinator will make contact with the family within 3 days of referral.

Referrals marked URGENT have a response time of 24 hours.

URGENT

1. IDENTIFYING INFORMATION

Referral date: _____ Student's TTSD ID#: _____

Student name: _____

Gender: Female Male Ethnicity: _____

School: _____ Grade: _____ Birth date: _____ Age: _____

Student address: _____ Zip: _____

Parent/Guardian name(s): _____

Home phone: _____ Cell phone: _____ Work phone: _____

Does the student have a **current** IEP? Yes No Section 504 Plan? Yes No

Does student and/or parent/guardian require an interpreter? Yes No Language: _____

To which school counselor is this student assigned? _____

2. REFERRAL INFORMATION

Who is making this referral?: (Name) _____

Referrer is a: Student Parent Teacher School Counselor Other _____

Referral source's phone #: _____ Email: _____

Has this student been staffed with your school's EBIS Team, "Red Zone" Meeting yet? Yes No

Date case was staffed or will be staffed: _____

In addition to this referral, what previous actions or future planning have taken place in regards to this student by the above mentioned team?

3. CONCERN (including self report/peer reports)

Does this student exhibit any of the following warning signs for at-risk behaviors?

Early Warning Signs (<u>low-to-medium</u> risk factors/behaviors)	
<input type="checkbox"/> Social withdrawal	<input type="checkbox"/> Intolerance for differences and prejudicial attitudes
<input type="checkbox"/> Patterns of impulsive and chronic hitting, intimidating	<input type="checkbox"/> Low school interest/Poor academic performance
<input type="checkbox"/> Excessive feelings of isolation and of being alone	<input type="checkbox"/> Excessive absences/Truancy
<input type="checkbox"/> Excessive feelings of rejection	<input type="checkbox"/> Affiliation with gangs
<input type="checkbox"/> History of violent and aggressive behavior	<input type="checkbox"/> Drug use and/or alcohol use
<input type="checkbox"/> Feelings of being picked on and persecuted	<input type="checkbox"/> Expression of violence in writing and drawings
<input type="checkbox"/> Persistent sadness	<input type="checkbox"/> Access to, possession of, and use of weapons
<input type="checkbox"/> Uncontrolled anger	<input type="checkbox"/> Recent loss, grief
	<input type="checkbox"/> Serious medical illness/traumatic injury

Care Coordination Team Referral Form – Page 2

Imminent Warning Signs (<u>high</u> risk factors/behaviors)	
<input type="checkbox"/> Serious physical fighting <input type="checkbox"/> Detailed threats of lethal violence <input type="checkbox"/> Possession and/or use of firearms, other weapons <input type="checkbox"/> Severe destruction of property	<input type="checkbox"/> Setting fires <input type="checkbox"/> Severe rage for seemingly minor reasons <input type="checkbox"/> Sexually aggressive behavior <input type="checkbox"/> Other self-injurious behaviors or threats of suicide

What prompted this referral? What are your concerns about risk? Any additional comments you would like to include?

4. PARENT CONTACT

A. Has the referral source notified the family yet that a referral for mental health care coordination services has been made? Yes No

B. If the family has not been notified of the referral for mental health care coordination services, please list the reason(s) why: _____

C. Name and phone # of parent/guardian contacted: _____

D. Date parent/guardian was notified of this referral: _____

E. Is parent/guardian supportive of a mental health assessment and services for the student? Yes No

5. OTHER PROFESSIONALS INVOLVED WITH STUDENT (for each yes, enter corresponding information below)

Child Welfare Services Yes No Juvenile System Yes No

Mental Health Provider Yes No Other Yes : _____

<u>Name</u>	<u>Agency</u>	<u>Phone number</u>
.....
.....

6. SERVICES REQUESTED:

Consultation with Teacher Only Initial Needs Screening for Student/Family Other _____

7. For Internal Use Only

Referral Processed By: _____ Date: _____
Care Coordinator Assigned to Case: _____

For CC Contact Information, refer to Referral Instructions

Behavior Support Team Referral Form 2011-2012

Student Name:	If the student is eligible under IDEA:
School:	Case Manager: Phone:
Student Grade:	School Psych.:
Classroom Teacher:	Facilitator:
Referral Date:	Eligibility Code:
Person Completing This Form:	

Please describe the behaviors that are of concern:
(That is, what led the team to refer the student at this time?)

Do you have safety concerns for this student? (Please describe)

What supports are currently in place for this student?

Behavior:

- Check-in/check-out program
- Counseling group
- First Steps Program
- Strategic Tutoring Program
- Other:

Academic:

- Title 1 Reading
- ELL
- Specially Designed Instruction (SpEd)
- Other:

Does the student or family access any of the following community services?

- Individual or group counseling
- Family counseling
- Psychiatrist
- DHS caseworker
- Juvenile Dept. caseworker or P.O.
- Truancy Officer
- Care Coordination
- Other:

Does the student currently take medications? (Please list)

Please describe the current family situation, including any stressors that the student is experiencing at home:

Behavior Support Team Referral Form Page 2

What services are you requesting? _____

Level I:

We need help with the following:

- Team Training
- Observations / Data Collection
- Developing materials (point cards, visual schedules, calming cards, etc.)
- File Review
- Developing an FBA
- Developing the Behavior Support Plan (BSP)
- Setting up a data system
- If SpEd: Developing behavior goals for the IEP
- Other:

Level II:

The FBA, behavior plan, and data system are in place. If the student is SpEd, the IEP team has reviewed and updated the IEP within the past month. We need help with:

- Team training on the student's Behavior Support Plan (BSP)
- Technical support for revising the FBA, BSP, and/or data system
- Trouble-shooting the BSP
- Additional adult support for implementation of the behavior plan
- Consultation with family to develop a home behavior program
- OIS Training
- Other:

Level III: (for students eligible under IDEA only)

The IEP team has completed the following steps and may be considering a change in placement:

- Level II consultation from the Behavior Support Team
- A review of the student's eligibility and IEP, including additional evaluations that are needed
- A review of the student's data, with responsive revisions to the BSP

This form must be accompanied by:

- FBA
- Behavior Plan
- Progress Monitoring and other Data
- IEP (For students who are eligible for Special Education)

Send to: Cathy Jensen, Hibbard Administration Center.

Behavior Support Team Referral Checklist 2011-2012

Student Name:	
School:	
Home School Referral Manager:	
Behavior Team Consultant:	
Restraint / Seclusion Protocol?	<input type="checkbox"/> OIS <input type="checkbox"/> Deflection / Safety Plan <input type="checkbox"/> NA

Activity	Who Responsible	Date Completed	Notes / Comments
1. EBIS Meeting to Review Behavior Concerns	EBIS Team		
2. Implement CICO *	EBIS Team		
3. Progress Monitoring / Data Review Meeting	EBIS Team		
4. Behavior Support Team Referral	Referral Manager		
5. Observations and Interviews			
6. Meeting to review or develop FBA			
7. Meeting to review or develop BSP			
8. Team Training			
9. Implementation Start Date			
10. Progress Monitoring / Data Review Meeting	EBIS Team		

- Or other appropriate interventions and progress-monitoring / data collection strategies

EBIS Student Intervention Profile – BEHAVIOR

Can Be Completed in IPAS

Student Name: _____ Date: _____ ID Number: _____

Initial Data Information: **Initial Grade Level:** _____

Attach DIBELS Individual Student Profile and Progress Monitoring Report or IPAS Report.

Most Recent OAKS RIT Scores & %iles: (grade taken ___): R/L ___ M ___ Wr. ___ Sci. ___

ELL Language Level: _____ Math CBM Screening Score: _____

Attendance Issues: _____ YTD Absences ___ YTD Tardies ___

Behavioral Issues: _____

(If behavioral concerns, attach SWIS Individual Student Report or data on behavior plan)

Number and times of Health Room Visits in past month: _____

Teacher/School
K _____
1 _____
2 _____
3 _____
4 _____
5 _____

Intervention #1

Start Date: _____ **Current Grade Level:** _____

Targeted Skill: _____

Program/Curriculum (From Behavior Protocol): _____

Group Size: Individual: ___ 2-3: ___ 5-8: ___

Frequency: Once/Wk: ___ Twice/Wk: ___ Daily: ___ Other: ___

Duration: 10 min.: ___ 15 min.: ___ 20 min.: ___ 30 min.: ___ Other: ___

End Date: _____ **Attach Progress Monitoring Data**

Number of intervention sessions attended during intervention period #1 _____ Total sessions possible _____

Notes:

Intervention #2

Start Date: _____ **Current Grade Level:** _____

Targeted Skill: _____

Program/Curriculum (From Behavior Protocol): _____

Group Size: Individual: ___ 2-3: ___ 5-8: ___

Frequency: Once/Wk: ___ Twice/Wk: ___ Daily: ___ Other: ___

Duration: 10 min.: ___ 15 min.: ___ 20 min.: ___ 30 min.: ___ Other: ___

End Date: _____ **Attach Progress Monitoring Data**

Number of intervention sessions attended during intervention period #2 _____ Total sessions possible _____

Notes:

Intervention #3

Start Date: _____ **Current Grade Level:** _____

Targeted Skill: _____

Program/Curriculum (From Behavior Protocol): _____

Group Size: Individual: ___ 2-3: ___ 5-8: ___

Frequency: Once/Wk: ___ Twice/Wk: ___ Daily: ___ Other: ___

Duration: 10 min.: ___ 15 min.: ___ 20 min.: ___ 30 min.: ___ Other: ___

End Date: _____ **Attach Progress Monitoring Data**

Number of intervention sessions attended during intervention period #3 _____ Total sessions possible _____

Notes:

Math and Written Language

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TTSD Standard Math Protocol

Grade Level(s)	Universal Screening Tool	Core Program	Strategic Interventions	Intensive Interventions
K	Progress Reports AND CBM: Missing Numbers	Math Expressions: 60 minutes per day	Increased teacher attention during math instruction	5 minutes of additional guided practice per day
1-2	Progress Reports AND Math Fluency CBMs		Core Plus: 10 minutes of additional guided practice per day (can be embedded in the core)	Core Plus: \geq 15 minutes of additional guided practice per day
3-5	Progress Reports, Math Fluency CBMs, and OAKs		OR 10 minutes of Computer Assisted Instruction per day	OR \geq 15 minutes of Computer Assisted Instruction per day
Who does this work?	Grade Level/EBIS Teams	Classroom Teachers	Classroom Teachers	EBIS Team Determines

Decision Rules:

- Screening:
 - Kindergarten: Students scoring in the lowest 20% on Missing Numbers CBM **OR** receiving only “o” and/or “/” in the “Progression of Mathematics Stages” on the Progress Report are considered for Strategic interventions.
 - Grade 1: Students scoring in the lowest 20% on Math Fluency CBMs **OR** receiving only “1” and/or “/” in “Math” on the Progress Report should be considered for Strategic interventions.
 - Grade 2: Students receiving only “1” and/or “/” in “Math” on the Progress Report or scoring below the 25th percentile on Math Fluency CBMs should be considered for Strategic interventions.
 - Grades 3-5: Students receiving only “1,” “2,” and/or “/” in “Math” on the Progress Report, scoring below the 30th percentile on the OAKS, and scoring below the 25th percentile on Math Fluency CBMs should be considered for Strategic interventions.
- Progress monitoring:
 - CBMs are given every two weeks. Trend lines are reviewed every 12 weeks. Trained IAs complete progress monitoring and graph data using IPAS.
- Intensify intervention:
 - If progress is below the expected rate after 12 weeks of Strategic Intervention, collect individualizing information and move to Intensive Intervention.
 - If progress is below the expected rate after 6 weeks of Intensive Intervention, EBIS team makes a referral to special education.

Tigard-Tualatin School District
6th Grade Math Placement Decision Rules

Students are placed in math classes based on their proficiency in mathematics and **NOT** their behavior in class or their homework completion rate.

Additional	<p>Math Lab: Math Support, <u>in addition to</u> On-Grade Level Placement Must meet <u>3</u> of the following criteria:</p> <ul style="list-style-type: none"> • Completion of 5th grade math with an overall course grade with a mean ≤ 3 • 5th grade OAKS score up to 217 • Completed 5/6 Math Placement Exam with a score up to 10 • Teacher Recommendation
On Grade	<p>6th Grade Math:</p> <ul style="list-style-type: none"> • 5th grade OAKS score up to 240 • Successfully completed 5/6 Math Placement Exam* with a score up to 29 • Teacher Recommendation
1 Level Above	<p>Pre-Algebra: Must meet <u>3</u> of the following criteria:</p> <ul style="list-style-type: none"> • Successful completion of 5th grade math with an overall course grade > 4.4 • 5th grade OAKS score of <u>241-255</u> • Successfully completed 5/6 Math Placement Exam with a score of 30 and above. Students scoring <u>35+</u> on the placement exam should also take the Algebra Readiness Exam*. • Teacher Recommendation
2 Levels Above	<p>Algebra: Must meet <u>3</u> of the following criteria:</p> <ul style="list-style-type: none"> • Successful completion of math with an overall course grade > 4.9 • 5th grade OAKS score > 255 • Successfully completed algebra readiness exam with a raw score > 38 (given to students that score > 255 on OAKS; 35+ on 5/6 Math Placement Exam; or by teacher, student or parent request) • Teacher Recommendation

***Assessments:**

- 5/6 Placement Exam given to all 5th grade students prior to 6th grade placement decisions
- Algebra Readiness Exam given to students who: Score 35+ on the 5/6 Placement exam; OR, have an OAKS score of 256 or better; OR by teacher, student or parent recommendation

Parents are important decision-makers in their children's education and are invited to participate in these discussions.

EBIS Student Intervention Profile – MATH Must Be Completed in IPAS

Student Name: _____ Date: _____ ID Number: _____

Initial Data Information: **Initial Grade Level:** _____

Attach DIBELS Individual Student Profile and Progress Monitoring Report or IPAS Report.

Most Recent OAKS RIT Scores & %iles: (grade taken ___): R/L ___ M ___ Wr. ___ Sci. ___

ELL Language Level: _____ Math CBM Screening Score: _____

Attendance Issues: _____ YTD Absences _____ YTD Tardies _____

Behavioral Issues: _____

(If behavioral concerns, attach SWIS Individual Student Report or data on behavior plan)

Number and times of Health Room Visits in past month: _____

Teacher/School	
K	_____
1	_____
2	_____
3	_____
4	_____
5	_____

Intervention #1
Start Date: _____ **Current Grade Level:** _____
Targeted Skill: _____
Group Size: 1-3: ___ 4-7: ___ 8 or more: ___ Class: ___
Frequency: DAILY
Duration: 10 min.: ___ 15 min.: ___ 20 min.: ___ 30 min.: ___ Other: ___
End Date: _____ **Attach Progress Monitoring Data.**
Number of intervention sessions attended during intervention period #1 ___ **Total sessions possible** ___
Notes:

Intervention #2
Start Date: _____ **Current Grade Level:** _____
Targeted Skill: _____
Group Size: 1-3: ___ 4-7: ___ 8 or more: ___ Class: ___
Frequency: DAILY
Duration: 10 min.: ___ 15 min.: ___ 20 min.: ___ 30 min.: ___ Other: ___
End Date: _____ **Attach Progress Monitoring Data.**
Number of intervention sessions attended during intervention period #2 ___ **Total sessions possible** ___
Notes:

Intervention #3
Start Date: _____ **Current Grade Level:** _____
Targeted Skill: _____
Group Size: 1-3: ___ 4-7: ___ 8 or more: ___ Class: ___
Frequency: DAILY
Duration: 10 min.: ___ 15 min.: ___ 20 min.: ___ 30 min.: ___ Other: ___
End Date: _____ **Attach Progress Monitoring Data.**
Number of intervention sessions attended during intervention period #3 ___ **Total sessions possible** ___
Notes:

TTSD Standard Written Expression Protocol

Grade Level(s)	Universal Screening Tool	Core Program	Strategic Interventions	Intensive Interventions
K	Progress Reports	MacMillan & Lucy Culkins: Minimum 30 minutes of instruction per day.	ERI	ERI and Language for Learning
1-4			Increased teacher attention More Guided Practice during core writing instruction	Core plus: ≥ 20 minute weekly session focused on guided practice
5	Progress Reports			
<i>Who does this work?</i>	EBIS/Grade Level Teams	Classroom Teachers	K: Reading Interventionist	K: Reading Interventionist
			1-5: Classroom Teacher	1-5: Grade Level Team

Decision Rules:

- Screening:
 - K-1: Students receiving ● at Emergent/Pre-Writing level on the Progress Report are “red flagged”.
 - 2-5: Students receiving 1’s and 2’s only in Organization, Conventions, and Sentence Fluency (Writing) on the Progress Report and/or students scoring below the 30th percentile on OAKS are “red flagged” by the EBIS grade level team.
 - Each “red flagged” student is assessed using Curriculum Based Measurements (Copy the Letter in Kinder; Total Words Written and Correct Word Sequences in 1-5). Students scoring below the 30th percentile on CBMs are placed in Second Tier. Interventions.
- Progress monitoring:
 - CBMs are given every other week. Trend lines are reviewed every 12 weeks.
- Intensifying intervention:
 - If progress is below the expected rate after 12 weeks of Second Tier Intervention, students move to Third Tier Intervention.
 - If progress is below the expected rate after 12 weeks of Third Tier Intervention, EBIS makes a referral to special education.

Note: It is critical to differentiate between “can’t” and “won’t” in this area. “Best Work” should always be used in determining the need for additional instruction.

Individualizing and Intensifying Interventions

Documents to be used prior to selecting the individualized intervention

Instructional Program Review Notice	39
Carta de Revisión Del Programa de Instrucción del Alumno	40
Parent RTI Brochure	41
RTI Manual para padres de familia	43
Developmental History	45
Individual Problem Solving Worksheet.....	52

**EFFECTIVE BEHAVIOR AND INSTRUCTION SUPPORT (EBIS)
Instructional Program Review Notice**

Dear _____:
(Parent / Guardian)

Your child, _____ has been receiving additional support in _____ through the Effective Behavior and Instructional Support (EBIS) process. The EBIS program's purpose is prevention of academic and behavior problems by supporting group and individual programs for all students.

_____ called you regarding your child's progress on _____.
(Teacher's Name) (Date)

The EBIS team is planning on meeting to discuss your child's needs and to revise his or her EBIS program on:
_____.
(Date)

Because your input is an important part of this process, a representative from the team will be contacting you soon to learn more about your child's developmental and school history. If you need more specific information, please contact _____ at _____.
(Team Coordinator) (Phone Number)

If you have questions regarding the EBIS program, please contact your school principal.

IMPORTANT NOTICE REGARDING SPECIAL EDUCATION: Sometimes students experience substantial ongoing difficulties in school as the result of disabilities. If the school team or your child's teacher(s) have this concern, they will contact you to discuss it. If you are concerned that your child may have a disability and is in need of special education services, please contact the school principal.

APOYO DE INSTRUCCIÓN Y COMPORTAMIENTO EFICAZ (EBIS) **Carta de Revisión Del Programa de Instrucción del Alumno**

Estimado _____ :

(Padre/ Tutor)

Su hijo/a, _____ ha estado recibiendo un soporte adicional en _____ por medio de Proceso de Apoyo Eficaz, Instrucción y Comportamiento (EBIS). El propósito del programa EBIS es la prevención de problemas académicos y de comportamiento y para apoyar programas individuales y de grupos para todos los estudiantes. _____ se comunico con usted acerca de el progreso de su

Nombre de Maestro(a)

hijo(a) el _____.

Fecha

para su hijo(a) el: _____.

Fecha

Debido a la importancia de su participación en el proceso un representante del grupo de trabajo se comunicara con usted en un corto plazo para saber mas de la historia y desarrollo escolar de su hijo(a). Si usted necesita mas información, por favor hable con _____ al _____.

(Coordinador de Equipo)

(Numero de Teléfono)

Si tiene preguntas con respecto al programa de EBIS, por favor de contactar al director de su escuela.

NOTICIA IMPORTANTE CON RESPECTO A LA EDUCACION ESPECIAL: A veces los estudiantes pasan por dificultades sustanciales en la escuela que resultan en inhabilidades de aprender. Si el equipo de la escuela o los maestros de su niño(a) tienen esta preocupación, ellos hablaran con usted para discutir esto. Si usted esta preocupado que su niño(a) tenga una inhabilidad de aprender y esta en necesidad de servicios de educación especial, por favor hable con el director de su escuela.

Parent RTI Brochure

How we determine who needs additional instruction

In Tigard-Tualatin School District, we review all elementary and middle school students' progress three times a year. In high school, we screen students when they enter school. For all students we review assessment, attendance, grade, and behavior data throughout the year. We track students' achievement in reading especially carefully, and we also look at math and writing performance.

In some cases, all students are given a short assessment. Other times, a team of professionals simply reviews existing academic, behavior, and attendance information. The teams use the data to decide which students are doing well in the standard classroom instruction, which students may need supplemental instruction, and which students may need individualized instruction.

When students receive supplemental small group or individualized instruction, we check their progress frequently. We use "decision rules" to look at the student's progress and decide if the child needs to have a different kind of supplemental instruction. The key idea is to make changes when instruction is not working for a child.

The first step is to provide small group interventions for a student. If, after a period of instruction, there is still concern, we will plan an individualized intervention. You are invited to participate in this process. During individualized interventions, we monitor children's progress frequently. If a student makes limited progress during an individualized intervention, we may ask for your permission to conduct an individual evaluation. This evaluation might result in the identification of a learning disability. No evaluation would be conducted without your written consent.

Parent participation

Parents are essential to children's success in school. When a child needs supplemental instruction, we will describe that instruction to you. We will also ask you to tell us about anything you think might affect your child's learning. For example, it is important for us to know if a child has missed a lot of school, experienced a trauma, or is having problems with friends at school. These types of problems may affect a student's progress, and if we know about them, we can design an intervention more effectively.

Parents frequently partner with the school to provide extra practice to develop skills. If you do want to provide extra support at home, you can work with the school to make yourself part of your child's program.



When children continue to have difficulty

The school will tell you whether your child begins to make sufficient progress, or if your child has continued difficulty. If you and the school have tried several interventions, and progress is still limited, you may be asked to give your consent for an evaluation. The purpose of such an evaluation is to determine what your child's educational needs are, and to consider whether he or she might have a learning disability.

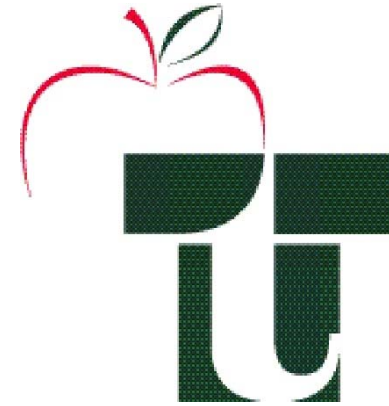
Response to Intervention (RTI)

The approach described in this brochure is called Response to Intervention (RTI). This is a way of organizing instruction that has two purposes:

1. To identify children needing help in reading, math, and writing, and prevent the development of serious learning problems; and
2. To identify children who, even when they get extra help, make very limited progress. Research has shown that these children sometimes have learning disabilities.

You may also request an evaluation at any time if you think your child may have a disability. No evaluation would take place without a conference with you, and your written consent.

If you have any questions about this information, please contact the school's Counselor or Principal.



Your child's instructional program in the Tigard-Tualatin School District

Tigard-Tualatin School District is committed to ensuring each child makes significant academic progress. To do this, we continuously review information that tells us how each child is progressing. Teacher teams in your school use this process, called “Effective Behavior and Instructional Support.” Look inside to see how this process can help your child.

RTI Manual para padres de familia

Cómo determinamos quién necesita instrucción adicional

En el Distrito Escolar de Tigard-Tualatin, repasamos el progreso de todos los estudiantes en las escuelas primarias (K-5°) tres veces al año. En las escuelas secundarias (6-8) y preparatorias (9-12), examinamos a estudiantes cuando entran a la escuela, y repasamos exámenes, asistencia, grado y datos de comportamiento a través del año. Seguimos el logro de los estudiantes en la lectura muy cuidadosamente y también miramos como están en las matemáticas y la escritura.

En algunos casos, se les da a todos los estudiantes un examen corto. Otras veces, un equipo de profesionales simplemente repasa información existente académica, de comportamiento y de asistencia. Los equipos utilizan los datos para decidir cuales estudiantes están haciendo bien en las clases de instrucción estándares, cuales estudiantes pueden necesitar instrucción suplemental y cuales estudiantes pueden necesitar instrucción individualizada.

Cuando estudiantes reciben instrucción suplemental en grupos pequeños o instrucción individualizada, nosotros revisamos su progreso con frecuencia. Utilizamos las “leyes de decisión” para mirar el progreso de los estudiantes y para decidir si el estudiante necesita tener una

instrucción suplemental diferente. La idea dominante es de hacer cambios cuando la instrucción no está trabajando para un niño(a).

El primer paso es de proporcionar intervenciones para el estudiante en grupos pequeños. Si, después de un periodo de instrucción, todavía hay preocupación, planearemos una intervención individualizada. Usted esta invitado a participar en este progreso. Durante intervenciones individualizadas, nosotros supervisamos el progreso de los niños frecuentemente. Si un estudiante hace un progreso limitado durante una intervención individualizada, podemos pedir su permiso de conducir una evaluación individual. Esta evaluación puede resultar en la identificación de una inhabilidad de aprender. No se conduciría ninguna evaluación sin su consentimiento escrito.

Participación del padres

Los padres son esenciales para el éxito de los niños en la escuela. Cuando un niño necesita instrucción suplemental, le describiremos esa instrucción a usted. También le preguntaremos que nos diga sobre cualquier cosa que usted piense puede afectar la habilidad de aprender de su niño(a). Por ejemplo, es importante que nosotros sepamos si un niño(a) ha faltado mucho la escuela, ha pasado por una trauma o esta teniendo problemas con amigos en la escuela. Estos tipos de

problemas pueden afectar el progreso de un estudiante y si sabemos sobre ellos, podemos diseñar una intervención con más eficacia.

Los padres se unen frecuentemente con la escuela para proporcionar práctica adicional para desarrollar habilidades. Si usted desea proporcionar ayuda adicional en el hogar, puede trabajar con la escuela para hacerse parte del programa de su niño(a).



Cuando los niños continúan teniendo dificultades

La escuela le dirá si su niño(a) esta empezando a hacer progreso suficiente, o si su niño(a) ha continuado con dificultad. Si usted y la escuela han tratado varias intervenciones, y el progreso todavía esta limitado, se le puede pedir por su consentimiento para una evaluación. El propósito de esa evaluación es para determinar cuales son las necesidades educativas de su niño y para considerar si el o ella pueda tener una inhabilidad de aprender.

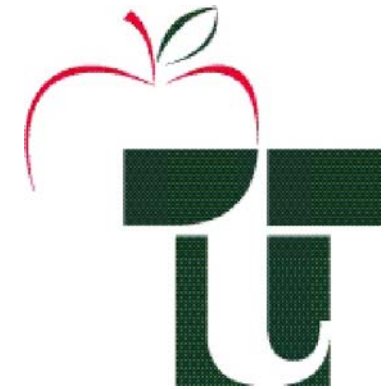
Respuesta a la Intervención (RTI)

El enfoque escrito en este folleto se llama Respuesta a la Intervención (RTI). Esta es una manera de organizar instrucción que tiene dos propósitos:

- 1 Para identificar a niños que necesitan ayuda en la lectura, matemáticas y escritura y prevenir el desarrollo de serios problemas de aprender; y
- 2 Para identificar a los niños que, aun cuando se les da ayuda adicional, hacen un progreso muy limitado. Investigaciones han demostrado que estos niños tienen a veces inhabilidades de aprender.

Usted también puede solicitar una evaluación en cualquier momento si usted piensa que su niño pueda tener una inhabilidad de aprender. Ninguna evaluación se tomara acabo sin una conferencia con usted y su consentimiento escrito.

Si tiene cualquier pregunta sobre esta información, por favor hable con el Especialista de Alfabetismo o con el Director de la escuela.



El programa educacional de su niño(a) en el Distrito Escolar de Tigard-Tualatin

El Distrito Escolar de Tigard-Tualatin esta comprometido a asegurar que cada niño(a) haga un progreso académico significativo. Para hacer esto, repasamos continuamente la información que nos dice como cada niño(a) esta progresando. Equipos de maestros en su escuela usan este proceso, llamado “Comportamiento Eficaz y Apoyo Educacional.” Mire adentro para ver como este proceso puede ayudarle a su niño.

Developmental History

Page 1 of 3

(To be completed through an interview with the counselor or school psychologist)

Student's Name: _____ **DOB** _____ **Age** _____ **Grade** _____
Person Interviewed: _____ **Relationship to Student:** _____
Interview Completed by: _____ **Date:** _____
Language Spoken in Home: _____ **Interpreter (If used):** _____

Birth History

- How often did you see a doctor while you were pregnant? Regularly ___ A few times ___ Not at all ___
- Were you sick or did you have any complications while you were pregnant? Yes ___ No ___
If yes, what did you have? _____
- Did you have measles or any other childhood disease while you were pregnant? Yes ___ No ___
If yes, what did you have? _____
- Did you have trouble giving birth? Yes ___ No ___ (Premature birth, complications, concerns at birth?)
If yes, please explain _____

- Was your child born in a hospital? Yes ___ No ___
- Did your child have any illness or other concerns during the first year? Yes ___ No ___
If yes, what was the illness or concern? _____

Developmental Milestones/Health History

- Were your child's developmental milestones (sitting (5 -8 mo.), walking (9-15 mo.), speaking in single words (9-15 mo.) and in sentences (1-2 yrs.), toilet training (2-3 yrs) generally within normal limits? Did you have any concerns about this?
Yes ___ No ___ If yes, please explain: _____

- Does the child have any brothers or sisters? If so, list ages, gender. _____

- Who lives in the home? (Parents, siblings, grandparents, etc.) _____

- Has your child's speech and/or language development been significantly different than his or her siblings?
(i.e. simpler vocabulary, later to begin speaking, difficulty following directions) Yes ___ No ___
If yes, please explain _____
- Do people outside the family easily understand what your child says? Yes ___ No ___
If no, please tell about it. _____

- What language(s) is (are) spoken in the home? _____
What language does your child speak most often with friends? _____ siblings? _____ What language does your child hear most often at home? _____ In which language does your child generally respond? _____

Developmental History
Page 2 of 3

Developmental Milestones/Health History (Continued)

13. Have any of the following happened to your child?
- | | | |
|---|---------|--------|
| a. Had a temperature over 104 degrees for more than a few hours? | Yes ___ | No ___ |
| b. Had to go to the hospital because of a temperature? | Yes ___ | No ___ |
| c. Ever lost consciousness? | Yes ___ | No ___ |
| d. Ever had a concussion? | Yes ___ | No ___ |
| e. Ever had any kind of an operation? | Yes ___ | No ___ |
| f. Ever been to a hospital for any other sickness or trouble not mentioned above? | Yes ___ | No ___ |
| g. Ever had problems with hearing or vision | Yes ___ | No ___ |
| h. Had frequent earaches? | Yes ___ | No ___ |

If yes, were tubes installed? _____ At what age? _____

If you answered yes to any of these questions, please tell about it: _____

14. Has your child been diagnosed with any physical or mental health problems? Yes ___ No ___
If so please explain: _____

15. Does your child take any kind of medicine or pills regularly for some condition? Yes ___ No ___
If yes, please list the medication(s)? What are they for and how long has your child been taking them? _____

16. Has your child ever seen a private counselor or psychologist? Yes ___ No ___ If so, for what reason? _____

17. Does your child have any problems sleeping (falling asleep, staying asleep)? _____

18. Is there any history of learning problems and/or speech/language difficulties in the family? Yes ___ No ___
Please explain _____

19. Is there any family history of physical or mental health problems? Yes ___ No ___
If so please describe: _____

20. Have any major stressful events occurred to you and your family within your child's lifetime, such as a major illness, death in the family, trauma, homelessness, moving far away from family, etc? If so, please explain and list when these things occurred. _____

Educational History

21. Did your child attend preschool? Yes ___ No ___ Please list frequency, duration, (days per week, hours per day) and types of activities. _____

22. How many different schools has your child attended? _____ If your child's primary language is not English, has your child had any formal schooling in their native language? _____ If so, for how many years? _____

23. Would you describe the child's school attendance as poor, fair, or good? _____ If there have been any interruptions in your child's school experience, please explain. _____

Developmental History

Page 3 of 3

Educational History (Continued)

24. What does reading with your child look like at home? (i.e., you reading to your child, your child reading to you, how much time per week, in what language, etc.)? _____

25. Does your child experience difficulty doing or completing homework? Please explain: _____

26. Do you have any concerns about your child's learning or school experience? If so, what do you think are the primary issue(s) contributing to your child's difficulties? _____

Activities/Hobbies

27. Now or in the past has your child been involved in any activities outside of school such as sports, playgroups, library visits, or scouts? Please list: _____

28. How much "screen time" or media does your child have access to daily? _____ What shows and video games does he or she watch or play most often? _____

29. What kinds of things do you expect or ask that your child do such as chores or responsibilities around the house (for example: cleaning his/her room, emptying the trash, answering the phone, caring for siblings, etc.)? Is this routine or when he/she feels like it? _____

30. What does your child's morning routine look like? _____
31. Describe your child's activity level (trouble sitting still, lethargic, etc.). _____

32. How easily does your child make and/or keep friends? _____
33. When you want your child to do something, do you feel you have to repeat yourself more often than you would like to or feel that you should have to? Yes _____ No _____
34. How does your child behave when frustrated or angry? _____

35. Does your child experience problems with changes in routine? Yes ___ No ___ If so, please describe. _____

36. What does the family like to do for fun together? What does your child like to do with just you?

37. What does your child do which pleases you the most (those things that make you proud as a parent)?

38. Do you have any concerns about your child that we haven't yet discussed? Yes _____ No _____
If so, please describe (what are they, when did they begin, what is being done about them)? _____

Historia del Desarrollo (*Developmental History*)

Page 1 of 4

(Para ser completada en una entrevista con un consejero o psicólogo de la escuela)

(To be completed through an interview with the counselor or school psychologist)

Nombre del Estudiante (*Name of Student*) _____

Fecha de Nacimiento (*DOB*) _____ **Edad (*age*)** _____ **Grado (*Grade*)** _____

Persona Entrevistada (*Person Interviewed*): _____

Relación con el Estudiante (*Relationship to Student*): _____

Entrevista Completada por (*Interview Completed by*): _____ **Fecha (*Date*)** _____

Historial de Nacimiento (*Birth History*)

1. ¿Con qué frecuencia visito un doctor mientras estaba embarazada? (*How often did you see a doctor while you were pregnant?*) Regularmente (*Regularly*) Algunas veces (*A few times*) Nunca (*Not at all*)
2. ¿Estuvo enferma o tuvo complicaciones durante su embarazo? (*Were you sick or did you have any complications while you were pregnant?*) Si (*Yes*) No Si sí, ¿Qué tuvo o cuales fueron las complicaciones? (*If yes, what did you have?*) _____
3. ¿Tuvo sarampión u otra enfermedad de niñez mientras estaba embarazada? (*Did you have measles or any other childhood disease while you were pregnant?*) Si (*Yes*) No Si sí, ¿qué es lo que tuvo? (*If yes, what did you have?*) _____
4. ¿Tuvo problemas al dar a luz, parto prematuro, complicaciones o problemas? (*Did you have trouble giving birth, Premature birth, complications, concerns at birth?*) Si (*Yes*) No Si sí, por favor explique (*If yes, please explain*); : _____
5. ¿Nació su hijo/a en un hospital? (*Was your child born in a hospital?*) Si (*Yes*) No
6. ¿Tuvo su hijo/a enfermedades o algo malo durante el primer año? (*Did your child have any illness or any other concerns during the first year?*) Si (*Yes*) No Si sí, ¿Cuál fue la enfermedad o que tenía mal? (*If yes, what was the illness or concerns?*) _____

Etapas de Desarrollo/ Historia de la Salud (*Developmental Milestones/Health History*)

7. ¿Fueron las etapas de desarrollo normales de su hijo/a, ej. sentarse (5-8 meses), caminar (9-15 meses), hablar palabras sueltas (9-15 meses), y frases (1-2 años), entrenamiento de baño (2-3 años) en general en límites normales? (*Were your child's developmental milestones, i.e., sitting 5-8 mo. walking 9-15 mo., speaking in single words 9-15 mo, speaking in sentences 1-2 yrs, toilet training 2-3 yrs generally within normal limits?*)? ¿Tiene algunas dudas acerca de esto? (*Did you have any concerns about this?*) Si (*Yes*) No Si sí, por favor explique (*If yes, please explain*):

8. ¿Tiene su hijo/a hermanos/as? Si sí, haga lista de las edades y sexo. (*Does your child have any brothers or sisters? If so, list ages and gender.*) _____
9. ¿Quien vive en casa? (padres, hermanos, abuelos, etc.) (*Who lives in the home? {parents, siblings, grandparents, etc}*) _____
10. ¿Ha sido significativamente diferente el habla o el desarrollo del lenguaje de su hijo(a) al de sus hermanos? (Por ejemplo usa vocabulario más sencillo, demoro mas en hablar, o se le dificulta seguir instrucciones) (*Has your child's speech and/or language development been significantly different than his or her siblings? {i.e. simpler vocabulary, later to begin speaking, difficulty following directions}*). Si (*Yes*) No Si sí, por favor explique. (*If yes, please explain*): _____

Historia del Desarrollo (*Developmental History*)

Page 2 of 4

Etapas de Desarrollo/ Historia de la Salud, Seguido (*Developmental Milestones/Health History, Continued*)

11. ¿Entienden las personas fuera de su familia lo que dice el niño/a? (*Do people outside the family understand what your child says?*) Sí (*Yes*) No Si no, por favor escriba sobre ello. (*If no, please tell about it*):

12. ¿Que idioma(s) se hablan en casa? (*What language(s) are spoken in the home?*) _____
¿Qué idioma usa mas su hijo/a con amigos/as? (*What language does your child speak most often with friends?*) _____
¿con sus hermanos/as? (*with siblings?*) _____ ¿Qué idioma escucha mas su hijo/a en casa? (*What language does your child hear most often at home?*) _____
¿En qué idioma generalmente responde su hijo/a? (*In which language does your child generally respond?*) _____.
13. ¿Algo de lo siguiente le ha sucedido a su hijo/a alguna vez? (*Have any of the following happened to your child?*)
- a. ¿ha tenido temperatura sobre 104 grados F° (40 grados C°) por más de unas cuantas horas? Sí (*Yes*) No
(*had a temperature over 104 degrees for more than a few hours?*)
 - b. ¿ha tenido que ir al hospital por razón de una temperatura? Sí (*Yes*) No
(*had to go to the hospital because of a temperature?*)
 - c. ¿ha perdido la consciencia? (*ever been knocked unconscious?*) Sí (*Yes*) No
 - d. ¿ha tenido una concusión cerebral? (*ever had a concussion?*) Sí (*Yes*) No
 - e. ¿ha tenido algún tipo de cirugía? (*ever had any kind of surgery?*) Sí (*Yes*) No
 - f. ¿ha visitado un hospital por cualquier otra enfermedad que no ha sido mencionada arriba? Sí (*Yes*) No
(*been to a hospital for any other sickness or trouble not mentioned above?*)
 - g. ¿ha tenido problemas de oído o la visión? (*ever had problems with hearing or vision?*) Sí (*Yes*) No
 - h. ¿ha tenido dolor de oídos frecuentemente? (*had frequent earaches?*) Sí (*Yes*) No
Si sí, ¿se instalaron tubos? (*if yes, were tubes installed?*) Sí (*Yes*) No
¿a qué edad? (*at what age?*) _____
Si contesto sí a una de estas preguntas, por favor escriba sobre ello. (*If you answered yes to any of these questions, please tell about it.*): _____
14. ¿Ha sido diagnosticado su hijo/a de algún problema de salud físico o mental? (*Has your child been diagnosed with any physical or mental health problems?*) Sí (*Yes*) No Si si, por favor explique (*If yes, please explain*):

15. ¿Toma su hijo/a cualquier tipo de pastillas o medicina regularmente para alguna condición? (*Does your child take any kind of medicine or pills regularly for some condition?*) Sí (*Yes*) No ¿Si sí, por favor diga para qué es la medicina y por cuánto tiempo lo ha estado tomando su hijo/a? (*If yes, please list the medication(s). What are they for and how long has your child been taking them?*) _____

16. ¿Ha sido visto su hijo/a por un psicólogo o un consejero privado? (*Has your child ever seen a private counselor or psychologist?*) Sí (*Yes*) No Si si, por que razón? (*If yes, for what reason?*): _____

17. ¿Tiene su hijo/a problemas de sueño (para dormir o dormir demasiado)? (*Does your child have any problems sleeping (falling asleep, staying asleep)?*) Sí (*Yes*) No _____
18. ¿Hay problemas de familia en el aprendizaje y/o dificultades de idioma? (*Is there any history of learning problems and/or speech/language difficulties in the family?*) Sí (*Yes*) No Por favor explique (*Please explain*) _____

Historia del Desarrollo (*Developmental History*)

Page 3 of 4

Etapas de Desarrollo/ Historia de la Salud, Seguido (*Developmental Milestones/Health History, Continued*)

19. ¿Hay historial de problemas mentales o físicos en la familia? (*Is there any family history of physical or mental health problems?*) Si (*Yes*) No Si sí, descríbalo (*If so, please describe*): _____

20. ¿Ha habido situaciones mayores de stress ocurrido a usted y a su familia durante la vida de su hijo/a tal como una enfermedad grave, una muerte en la familia, trauma, indignencia, o que se hubieran mudado lejos de la familia, etc.? Si así fue, por favor explique y haga lista de cuando ocurrieron estas cosas. (*Have any major stressful events occurred to you and your family within your child's lifetime, such as a major illness, death in the family, trauma, homelessness, moving far away from family, etc? If so, please explain and list when these things occurred.*) Si (*Yes*) No _____

Historia Educativa (*Educational History*)

21. ¿Su hijo/a asistió a la pre-escuela? (*Did your child attend preschool?*) Si (*Yes*) No
Por favor haga lista de la frecuencia con que asistió, la duración (días por semana, horas por día) y las diferentes actividades que hacían. (*Please list frequency, duration (days per week, hours per day), and types of activities.*)

22. ¿A cuántas escuelas ha asistido el niño/a? (*How many different schools has the child attended?*) _____
Si el idioma principal de su hijo/a no es el inglés, ¿ha recibido instrucción formal en su idioma nativo? (*If your child's primary language is not English, has your child had any formal schooling in their native language?*)
 Si (*Yes*) No ¿Si sí, Por cuantos años? (*If so, For how many years?*) _____
23. ¿Cómo describiría la asistencia escolar del estudiante: buena, regular, o mala? (*Would you describe the child's school attendance as poor, fair, or good?*) _____ Si ha habido interrupciones durante la experiencia escolar de su hijo(a), por favor explique. (*If there have been any interruptions in your child's school experience, please explain.*) _____
24. ¿Describa una situación de lectura en su casa (ej. Usted lee a su hijo/a, su hijo/a lee a usted, cuanto tiempo por semana, y en que idioma, etc.? (*What does reading with your child look like at home (i.e., you reading to your child, your child reading to you, how much time per week, in what language, etc.?*) _____

25. ¿Experimenta dificultad su hijo/a para terminar la tarea? (*Does your child experience difficulty doing or completing homework?*) Si (*Yes*) No Por favor explique (*Please explain*): _____

26. ¿Tiene usted dudas acerca de la experiencia educativa de su hijo/a? Si sí, cual es son las principales razones que contribuyen a estas dificultades? (*Do you have any concerns about your child's learning or school experience? If so, what do you think are the primary issue(s) contributing to your child's difficulties?*) _____

27. Está o ha estado su hijo/a envuelto en alguna actividad fuera de la escuela tal como en deportes, grupos de juego, visitas a la biblioteca o ha sido excursionista/scout? (*Now or in the past has your child been involved in any activities outside of school such as sports, playgroups, library visits, or scouts?*) Por favor haga mención (*Please list*): _____

Historia del Desarrollo (Developmental History)

Page 4 of 4

Actividades y Pasatiempos (Activities/Hobbies)

28. ¿Qué tanto tiempo pasa en la pantalla o que tanto acceso diario tiene al medio de comunicación? ¿Qué programas o videos juegos juega mas frecuentemente? (*How much screen time or media does your child have access to daily? What shows and video games does he or she watch or play most often?*) _____

29. ¿Qué clase de cosas espera usted o le pide a su hijo/a que hagan como quehaceres o responsabilidades alrededor de la casa (por ejemplo: limpiar su cuarto, tirar la basura, contestar el teléfono, cuidar a hermanos, etc.)? ¿Esto es rutina o cuando quiera el/ella? (*What kinds of things do you expect or ask that your child do such as chores or responsibilities around the house (for example: cleaning his/her room, emptying the trash, answering the phone, caring for siblings, etc.)? Is this routine or when he/she feels like it?*) _____

30. ¿Cuál es la rutina matinal de su hijo/a? (*What does your child's morning routine look like?*) _____

31. Describa el nivel de actividades (problema para estar sentado, letargia, etc.) (*Describe your child's activity level (trouble sitting still, lethargic, etc.)*) _____
32. ¿Qué tan fácil es para su hijo/a hacer amigos y mantener amistades? (*How easily does your child make and/or keep friends?*) _____
33. Cuando usted quiere que su hijo/a haga algo ¿siente que tiene que repetírselo más de lo que quisiera o que debiera hacerlo? (*When you want your child to do something, do you feel you have to repeat yourself more often than you would like to or feel that you should have to?*) Si (Yes) No
34. ¿Cómo se comporta su hijo/a cuando se enoja o esta frustrado? (*How does your child behave when frustrated or angry?*) _____
35. Tiene su hijo/a problemas con el cambio de rutinas? Si si, describa. (*Does your child experience problems with changes in routine? If so, please describe.*) _____
36. ¿Qué le gusta hacer a la familia para divertirse juntos? (*What does the whole family like to do for fun together?*) _____

37. ¿Qué hace su hijo/a que le agrada a usted (esas cosas que lo enorgullecen como padre/madre)? (*What does your child do which pleases you the most (those things that make you proud as a parent)?*) _____

38. Tiene usted preocupaciones sobre su hijo/a que no hayan sido discutidas? (*Do you have any concerns about your child that we haven't yet discussed? If so, please describe (what are they, when did they begin, what is being done about them)?*) _____ Si sí, describa (*If so, please describe*): _____

Individual Problem Solving Worksheet File Review and Problem Identification

Date:	School:	Grade:	Teacher:	Person completing this form:
Student Name:	Case Manager:	Current Services (circle): Sp. Ed., ELL, Title 1, 504, other: _____		

ATTENDANCE REVIEW: Complete the following or attach the student profile from the Data Warehouse.

Grade	K	1	2	3	4	5
School Year						
School(s) Attended						
Days Present per year						
Days Absent per year						
Attendance Percentage						

Grade	6	7	8	9	10	11	12
School Year							
School Attended							
Days Present per year							
Days Absent per year							
Attendance Percentage							

Review of report cards, progress reports, and teacher remarks by grade level significant for:

<i>Reading achievement:</i>	
<i>Math achievement:</i>	
<i>Behavior (including attending skills):</i>	
<i>Language skills:</i> Significant difficulty (2's or less on report card) in writing, speaking skills, organization, social skills, following directions, or difficulty across subject areas requiring comprehension that can not be explained by other factors.	
<i>Hearing Screening Results:</i>	<i>Vision Screening Results:</i>
<i>English Language Development:</i>	
<i>Other (including attendance issues):</i>	

INDIVIDUAL PROBLEM SOLVING WORKSHEET – Page 2 –

Complete the following sections or attach the Student Profile Report from the Data Warehouse and IPAS graph

STUDENT: _____ DATE: _____

ACHIEVEMENT REVIEW – READING

Grade	K	1	2	3	4
End Of Year BENCHMARKS	PSF: 40 NWF: 28	NWF: 43 Winter ORF: 47	ORF: 87	ORF: 100 OAKS: 211	ORF: 115 OAKS: 216
Expected (Ex) & Ambitious (Amb) Gains based on DIBELS Next Benchmarks	Ex -PSF: 1.3 phonemes/wk Amb -PSF: 1.9 phons./wk	Ex -NWF: 1 CLS/wk Amb -NWF: 1.25 CLS/wk Ex -ORF: 1.5 words/week Amb -ORF: 1.9 words/week	Ex -ORF: 1.1 words/wk Amb -ORF: 1.6 words/wk	Ex -ORF: .9 words/wk Amb -ORF: 1.4 words/wk	Ex -ORF: .8 words/wk Amb -ORF: 1.4 words/wk OAKS: 5 points/year
STUDENT SCORE	PSF: NWF:	ORF:	ORF:	ORF: OAKS:	ORF: OAKS:

Grade	5	6	7	8	11
End of Year BENCHMARKS	ORF: 130 OAKS: 221	ORF: 120 OAKS: 226	OAKS: 229	OAKS: 232	OAKS: 236
Expected (Ex) & Ambitious (Amb) Gains based on DIBELS Next Benchmarks	Ex -ORF: .6 words/wk AMB -ORF: 1.1 words/wk OAKS: 5 points	Ex -ORF: .7 words/wk AMB -ORF: .94 words/wk OAKS: 5 points	OAKS: 3 points	OAKS: 3 points	OAKS: 4 points
STUDENT SCORE	ORF: OAKS: %ile:	ORF: OAKS: %ile:	OAKS: %ile:	OAKS: %ile:	OAKS: %ile:

Other information: Summary of teacher concerns, referral questions, etc.

ACHIEVEMENT REVIEW - MATH MULTIPLE CHOICE

Grade	3	4	5	6	7	8	11
BENCHMARKS	OAKS: 212	OAKS: 219	OAKS: 225	OAKS: 227	OAKS: 232	OAKS: 234	OAKS: 236
EXPECTED GAINS	N/A	OAKS: 7 points	OAKS: 6 points	OAKS: 2 points	OAKS: 5 points	OAKS: 2 points	OAKS: 2 points
STUDENT SCORE	OAKS: %ile	OAKS: %ile	OAKS: %ile	OAKS: %ile	OAKS: %ile	OAKS: %ile	OAKS: %ile

Other information: Summary of teacher concerns, referral questions, etc.

INDIVIDUAL PROBLEM SOLVING WORKSHEET – Page 3 –
Complete the following sections or attach the Student Profile Report from the Data Warehouse

STUDENT: _____ DATE: _____

ACHIEVEMENT REVIEW – ELL LANGUAGE Please check with your ELL Dept. or teacher for cut scores prior to 2008 school year.

Grade	K	1	2	3	4	5	6	7	8	9	10
ELPA benchmarks											
Beginner											
Early Intermediate level 2	483	492	495	501	497	497	497	497	499	491	493
Intermediate Level 3	492	507	508	514	508	508	506	507	508	501	501
Early Advanced Level 4	498	514	514	521	514	516	515	517	518	515	516
Advanced Level 5- EXIT	507	523	523	529	521	523	522	524	526	526	527
For each school year, circle student's composite score above that matches his or her level.											
TOTAL Student Score	T ___	T ___	T ___	T ___	T ___	T ___	T ___	T ___	T ___	T ___	T ___
Reading	R ___	R ___	R ___	R ___	R ___	R ___	R ___	R ___	R ___	R ___	R ___
Writing	W ___	W ___	W ___	W ___	W ___	W ___	W ___	W ___	W ___	W ___	W ___
Listening	L ___	L ___	L ___	L ___	L ___	L ___	L ___	L ___	L ___	L ___	L ___
Speaking	S ___	S ___	S ___	S ___	S ___	S ___	S ___	S ___	S ___	S ___	S ___
Comprehension	C ___	C ___	C ___	C ___	C ___	C ___	C ___	C ___	C ___	C ___	C ___

Other information: Summary of teacher concerns, referral questions, etc.:

Attach ELD Data, either LAS Benchmark OR CWS and S. Dutro Quick Screen

ADDITIONAL REVIEW QUESTIONS FOR ELL STUDENTS

_____ How long has the child been in an ELL program in the United States?

_____ Is the student's language level and rate of progress similar to the language level of other students in their cohort group? *(This should give an initial indication of potential learning difficulty IF the child has had years of explicit English language instruction but not made progress.)*

_____ Is there an indication in the Developmental History that the child has a delayed or disrupted educational experience? *(This could explain why the child's skills are very low.)*

_____ Is there an indication in the Developmental History that the student's language and/or academic development has been different from his or her peers? *(This might be an indication that the student may have a learning difference that is inherent.)*

INDIVIDUAL PROBLEM SOLVING WORKSHEET – Page 4 –
Complete the following sections or attach the Student Profile Report from the Data Warehouse and IPAS

STUDENT: _____ DATE: _____

ACHIEVEMENT REVIEW - WRITING

	Grade 4	Grade 7	Grade 11
COMPOSITE BENCHMARK	32 to 39 (28 to 31 may nearly meet. The district may declare the student met if all work sample requirements are met) Minimum of 3 in each trait.	40 to 49 (35 to 39 may nearly meet. The district may declare the student met if all work sample requirements are met) Minimum of 3 in each trait.	40 to 49 (35 to 39 may nearly meet. The district may declare the student met if all work sample requirements are met) Minimum of 3 in each trait.
STUDENT SCORE (Note areas of concern by traits)			

Other information: Summary of teacher concerns, referral questions, etc.

Identify Areas of Instructional Need

Check Area of Concern	Select Individualized Intervention: Curriculum	Time: From Reading Protocol	Other Intervention Change (such as group size, behavior plan, etc. from pg. 8)
<input type="checkbox"/> Phonemic Awareness			
<input type="checkbox"/> Phonics			
<input type="checkbox"/> Fluency			
<input type="checkbox"/> Vocabulary			
<input type="checkbox"/> Comprehension			
<input type="checkbox"/> Language Development			
<input type="checkbox"/> Number Sense			
<input type="checkbox"/> Conceptual Understanding			
<input type="checkbox"/> Organization			
<input type="checkbox"/> Grammar/Spelling			

INDIVIDUAL PROBLEM SOLVING WORKSHEET – CONTINUED

PAGE 5: TO BE COMPLETED WITH THE TEAM PRIOR TO DESIGNING THE INDIVIDUALIZED INTERVENTION

STUDENT: _____ **DATE:** _____ **TEAM MEMBERS:** _____

HYPOTHESIS DEVELOPMENT

1. Does evidence support that the student's problems may be primarily due to problems with attention, motivation, or other behavioral difficulty? Include data along with progress monitoring of behavioral supports.

--

2. Does evidence support that the student's problems may be primarily due to attendance problems, or frequent school interruptions? If so, indicate reasons for absences and interruptions. What interventions have been put in place to address this issue? Progress should be proportionate to attendance.

--

3. Does evidence support that the student's problems may be primarily due to other concerns like trauma, economic or cultural disadvantage, or other disabilities? Describe. Be sure to note *when* these issues occurred and their correlations with any academic concerns. What will be done to help the student be more successful?

--

4. Does the evidence support that the child's difficulties may be the result of language difficulties in areas such as language processing, social language, or articulation? Indicate next steps.

--

5. Does the evidence support the hypothesis that the difficulty is due to limited English proficiency? Indicate next steps.

--

6. Does the evidence suggest that the student has low skills and slow progress despite intensive interventions? What will the individualized intervention be? Curriculum, time per day, size of group, etc.

--

Sample Agendas, Surveys, and Supporting Documents

Sample Elementary EBIS 20% Meeting Agenda	58
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Sample Elementary EBIS 20% Meeting Agenda

Behavior: Identify students and determine whether adequate supports are in place. If not, make a plan for support.

- Grades K – 5 Decision Rule: Who are the students with one (1) or more Office Discipline Referrals in the past month?
 - Repeaters? Review progress monitoring data and adjust interventions if necessary.
- Kindergarten Decision Rule: Who are the students identified through the First Step assessment?
 - Review progress monitoring data and adjust interventions if needed. If in First Step, review data with the First Step consultant
- Who are the students with two (2) or more counseling referrals for the past month?
 - Determine appropriate Second Tier intervention from Behavior Protocol.
 - Repeaters? Review progress monitoring data and adjust interventions if necessary.
- Who are the students with three (3) or more visits to the health room in the past month?
 - Repeaters? Make counseling referrals as necessary.
- Review progress monitoring data (i.e., CICO) for students currently on behavior plans.
- Any other children about whom teachers are concerned?

Attendance: Identify students and develop a plan for positive support at home and school.

- Who are students with five (5) or more tardies and/or absences in the past month?
 - Which students need a positive support plan at school? What will it be?
 - Which students need a parent contact? Plan for phone call or one of three letters.

Reading: Which students scoring in the bottom 20% have four (4) or more data points below their aim line or a trendline that is flat or decreasing and the scores that are below benchmark or IPAS states to change the intervention.

- After first six (6) weeks, adjust intervention and complete fidelity check
- After second six (6) weeks, notify parents, collect the information below, and design an individualized intervention.
 - Classroom teacher calls parent to discuss lack of progress of the student and sends RTI brochure to parent or gives to parent during Developmental History meeting
 - Complete the Individual Problem Solving Worksheet
 - Counselor/psychologist completes the developmental history
 - Based on information gathered, along with the Individual Profile and the ELL information if relevant, the sub-team designs the individualized intervention, using the Hypothesis Development page from the Problem Solving Worksheet.
- After third four to six week intervention if student continues to not make improvement, consider a referral to Special Education.

Math: Consider placing the following students in a strategic math intervention:

K – 1: Students scoring in the lowest 20% on the CBM screening or receiving only /, 0, or 1 on their progress report

2nd: Students receiving only 1 and/or / on the Progress Report or scoring below the 25th percentile on Math Computation CBMs.

3rd – 5th: Students receiving only 1, 2, and/or / on the Progress Report and scoring below the 25th percentile on Math Computation CBMs and scoring below the 30th percentile on OAKS

Progress monitor students in math interventions every two (2) weeks. Review the data every 8 weeks.

Elementary EBIS 80% Meeting Guidelines

Meeting tips:

- Use a projector or wall chart to display student data
- Meet only if the principal and other essential team members are present
- Remind the team that the focus of the meeting is general education and ensuring that all students are making growth (review data disaggregated by race, special programs (ELL, Sped), subject, teacher)
- Designate roles (timekeeper, facilitator, note taker)
- Organize the data before the meeting
- Celebrate successes
- Conduct 80% meetings after each DIBELS screening.

Team membership:

- | | |
|-----------------------|------------------------------------|
| • Principal | * ELL Teacher |
| • Literacy Specialist | * Special Education Representative |
| • Counselor | * Grade Level Representative |

Purpose: To determine the effectiveness of the core program and make necessary adjustments if it is not meeting the needs of 80% of the students.

Examine the data: * Attendance * DIBELS
* Behavior (ODRs) * OAKS

- Review data from the DIBELS Cross-Year Performance Report and Summary of Effectiveness Report and ask the following questions:
 - If the grade level increased the percent of students at low risk or established or decreased the percent of students at deficit, what are some differences in the system that might have resulted in this improvement?
 - It is helpful to focus on characteristics of the system- such as instructional materials, time, and grouping, rather than commenting on how this year's class is "just higher than last year's".
 - If the grade level decreased the percent of students at low risk or increased the students in the at risk category, consider what are some differences in the system that might be attributed to this decrease in the data.
 - What are some characteristics of the system that were in place last year that are no longer in place this year?
 - Were the walk to read groups changed significantly in the types of students that were grouped together or in the amount of time students are practicing reading connected text?
 - Are students receiving small group instruction during the 90 minutes to practice reading aloud in connected text?

Are 80% or more of your students meeting benchmark?

Are ALL subgroups making growth? (Grade Level, Course/Class, Ethnicity, ELL, Sped)?

Have you set ambitious goals for the next quarter?

Yes: Celebrate!

No: Discuss the following questions about the core program.

READING

- Are all teachers using the program with a high degree of fidelity?
- Is instructional time protected, or are there interruptions such as school assemblies, fire drills, etc.?
- Is the instructional block sufficient, or is more time needed?
- Are students grouped appropriately? (class with the lowest skills has the fewest students, class with the highest skills has the most students, most qualified teacher teaches the lowest performing students)

ATTENDANCE

- Is there a clearly articulated attendance policy?
- Is there sufficient outreach to families and a welcoming attitude toward all students?

BEHAVIOR

- Are a school-wide behavior policy, a behavior curriculum and an EBS team in place?
- Are behavior expectations posted, taught, practiced, and reinforced at the school and classroom level?
- Are support personnel such as bus drivers and secretarial staff trained in positive behavior support?
- Do all staff understand and follow consistent guidelines regarding what constitutes a classroom managed or an office managed referral?
- Is there a classroom as well as a school-wide behavior incentive

Acronyms

ODRs – Office Discipline Referrals
OAKS – Oregon Assessment of Knowledge and Skills
SLP – Secondary Literacy Program
ELL – English Language Learners
SPED – Special Education

system?

ASSESSING & PLANNING EBIS TEAM PROCESS IN ELEMENTARY SCHOOLS

Coaching Feedback Document

School: _____ Grade Level _____ Date: _____

Team Members: _____

Observer: _____

Status				Feature	Comments
In Place	Partially In Place	Not in Place	Not Observed		
Observable Features					
				1. Team is made up of the Principal, Counselor, Grade level teachers, Lit Specialist/Title 1, and Specialists from Sp. Ed. & ELL.	
				2. School administrator is an active participant on the EBIS team.	
				3. Students in reading interventions are progress monitored weekly. Team reviews DIBELS data for these students at EBIS meetings.	
				4. Students who meet the screening criteria for interventions on the <i>Math Protocol</i> are progress monitored bi-weekly and their progress is reviewed at EBIS meetings.	
				5. Students who meet the screening criteria for interventions on the <i>Behavior Protocol</i> (more than 2 ODRs since the last meeting or more than 5 for the year) are placed in behavior interventions and are progress-monitoring daily. Their data is reviewed at EBIS meetings.	
				6. Team identifies and determines interventions for students who have 5 or more absences or tardies since the previous meeting. Data is collected and reviewed at EBIS meetings.	
				7. Teams use the protocols (Reading, Behavior, and Math) to make decisions on interventions, data to be collected, and person responsible for collecting data.	
				8. Grade level teams meet every 4 to 6 weeks to review progress-monitoring data on students in interventions.	
				9. Minutes of the meeting are kept and distributed to team members in a timely manner.	
				10. <i>Decision rules</i> are followed and changes to interventions are made based on aimline/trendline analysis.	
				11. Only those changes to interventions listed on the <i>Intervention Changes and Modifications Form</i> are considered as changes.	

Assessing & Planning EBIS Team Process – Interview Form
Elementary Schools

School: _____

Date: _____

Interviewer: _____

People Interviewed: _____

Status			Feature	Comments
In Place	Partially In Place	Not in Place		
Determine through Interview				
			1. The EBIS Group Intervention & Planning Form is completed for each grade level and lists students who are below the 20 th percentile on DIBELS or who meet criteria for interventions in math, behavior, and/or attendance.	
			2. The EBIS Student Intervention Profile is started for each student receiving an intervention and is updated when new interventions are implemented.	
			3. Team identifies students and/or reviews progress-monitoring data on students falling below the 20 th percentile on DIBELS.	
			4. Students in math interventions are progress monitored every two weeks.	
			5. Students in reading interventions are progress monitored weekly.	
			6. Daily data is collected for students in behavioral or attend. interventions.	
			7. Team follow the procedures outlined in the Planning for English Language Learners Document when determining needs of struggling ELL students.	
			8. Parents are notified when their child is placed in intervention or when there has been a change in intervention	
			9. Team analyzes cohort data for ELL students in interventions.	
			10. After two failed group interventions, the team waits to collect additional information about the student (see Planning for the Individual Student page) before planning the individualized intervention.	
			a. The EBIS Team Meeting Notice is sent to parents	
			b. A Case Manager is assigned to ensure that all required tasks are completed.	
			c. Parents are given the RTI Process Brochure .	
			d. A Developmental History is obtained	
			e. If the student has a second language, the ELL teacher at the school obtains information about language and language development and the team completes the ELL Student Data Checklist.	
			f. The EBIS Individual Problem Solving Worksheet is completed through a review of the student's cumulative file.	
			g. The EBIS team uses the information obtained from the developmental history and problem solving worksheet and the Reading Protocol or other appropriate protocol to determine the appropriate Tier III intervention for the student.	
			11. If reading or math progress continues to be below the aimline after 4 to 6 weeks of the individualized intervention, the team completes a referral for special education services.	
			12. The EBIS Student Intervention Profile, Developmental History Form, Progress Monitoring Data, and the Individual PS Worksheet are attached to the Special Ed Referral Form.	
			13. EBIS team reviews data on student performance at least 3 times each year (fall, winter, spring) to evaluate effectiveness of the core programs.	
			a. Data regarding the core program are disaggregated by race, special programs (such as ELL and Sped), grade level, and class.	
			14. Results of the triennial review are shared with grade level teams and changes are made as needed based on the data.	

Elementary EBIS Team Planning Survey

To be completed at least annually, used as a guide for planning staff development, and submitted with the reading fund action plan

Please complete the following items on your own. After completing the entire document, place a checkmark next to the top three items that are not fully in place that you would prioritize for goal setting in your building.

Please indicate your position at your school: Administrator Teacher Specialist

EBIS Features	Rating			
1. Team Membership and Process: Building Level	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
a. EBIS teams include principal, special education representative, literacy/reading specialist, counselor and/or psychologist, classroom teachers, and ELL teacher.				
b. Principal, teachers, and representatives from special education, counseling, and ELL attend every meeting.				
c. Grade level teams meet regularly every four to six weeks.				
d. Building principal provides instructional leadership at EBIS meetings (e.g., interprets data, guides intervention decision making, allocates resources, etc.).				
e. Team roles are clearly defined (e.g., facilitator, time keeper, data analyst, recorder)				
f. All meetings have clearly defined agendas.				
g. Meetings include review of progress monitoring data for all students in 20% group. Decision rules from the appropriate protocol (reading, behavior, math) are used to guide changes in interventions.				
h. The buildings screening process quickly identifies new students who fall in the bottom 20% and places them in appropriate interventions.				
i. EBIS meetings are completed within the allocated time (30 - 60 minutes).				
j. Specific data on student performance is used at the EBIS meeting to make decisions about student placement. These decisions are not made based on teacher report alone.				
EBIS Features	Rating			

1. Team Membership and Process: Building Level (continued)	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
k. At least 2 times per year, teams review the effectiveness of the core program.				
l. If less than 80% of students (disaggregated by grade level, ELL, special education, ethnicity) are at benchmark, teams discuss and plan for changes to the implementation of the core program.				
m. The minutes from each EBIS meeting are distributed within two days of the meeting. This documentation helps to clarify specific tasks that team members must complete before the next EBIS meeting. (Who will do what by when.)				
2. Core Instructional Program	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
a. A core reading program (Macmillan) is implemented consistently at your school.				
b. The core curriculum is delivered for a minimum of 60 minutes per day in kindergarten and 90 minutes per day in 1 st through 5 th grades (based on the Reading Protocol).				
c. Students are flexibly grouped according to skill level.				
d. New teachers receive initial training in the core reading curriculum, and returning teachers receive yearly refresher courses.				
e. Teachers have ready access to high quality additional support (e.g., peer coaching, classes) as needed.				
f. Teachers have received sufficient support to adjust the implementation of the core program based on students' skill, while still maintaining fidelity to the program.				
g. Building principal conducts frequent fidelity checks and observations of classroom teachers.				
h. Assessments from the core program are administered and reviewed to guide decisions about student placement.				

EBIS Features	Rating			
3. Screening and Progress Monitoring Procedures	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
a. All assessors (both screening and progress monitoring) receive thorough initial training as well as yearly refresher classes.				
b. Progress is monitored weekly or bi-weekly according to protocol for all students receiving interventions.				
c. Administration and scoring of measures is routinely checked for inter-rater reliability.				
d. Building staff is thoroughly trained and skilled in data analysis and interpretation.				
e. Data from math screener along with in-program assessments are used to place appropriate students in math interventions.				
f. Data from DIBELS screener along with in-program assessments are used to place appropriate students in reading interventions.				
g. Progress monitoring data is reviewed at each regular EBIS meetings				
4. Decision Rules	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
a. All EBIS team members understand decision rules and have access to the Reading, Math, Writing, and Behavior protocols.				
b. Progress is monitored and interventions changed based upon the decision rules for students who fail to make adequate progress after four to six weeks of intervention.				
c. Prior to placing a student in an individualized intervention (after two failed group interventions for elementary students), the following are completed: The Problem Solving Worksheet, a developmental history, and if the student is receiving ELL services, an evaluation of his/her language level. Parents receive RTI Brochure at this time.				
d. Decision rules are consistently followed for all students.				
EBIS Features	Rating			

5. Reading Interventions	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
a. Research based interventions are available at each grade level and address phonemic awareness, phonics, fluency, comprehension, and vocabulary.				
b. At least one member of the EBIS team is highly skilled and knowledgeable regarding the range of intervention options.				
c. Intensive students at grades 2 - 5 receive at least 30 minutes of intervention daily in addition to core instruction.				
6. Interventions for Reading, Math, Writing and Behavior	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
a. Interventions are chosen to address specific areas of need of the student. Students participate in a reasonable number of programs so as to have an aligned, coherent program without conflicting information being presented.				
b. The Student Intervention Profile is kept up to date for each student in an intervention, with accurate program information and start and end dates for interventions.				
7. Behavior and Attendance Concerns	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
a. EBIS teams review attendance and behavior records at each meeting and place students who meet the decision rules into behavioral interventions.				
b. Students in interventions due to problems with behavior or attendance have their progress monitored and the data reviewed at each EBIS meeting. If inadequate progress is made, interventions are intensified.				
c. If a student continues to have behavioral difficulties even with a strategic behavioral intervention in place, a Functional Behavioral Assessment (FBA) is completed and a Behavior Support Plan developed.				

EBIS Features	Rating			
8. LD Eligibility	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
a. Referrals are always accompanied by appropriate documentation (e.g., progress monitoring data, student intervention profile, developmental history, problem solving worksheet)				
b. Students are referred for a special education evaluation by the EBIS team after three failed interventions (unless extenuating circumstances are present).				
9. Parent Participation	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
a. A system is in place, which ensures that parents regularly receive screening and progress monitoring data.				
b. Parents are consistently notified when students begin or change interventions.				
c. Parents receive the TTSD RTI Brochure when their child is about to begin the individualized intervention.				
d. Input from parents solicited and used in EBIS decision-making, with targeted outreach to parents with diverse needs (e.g. poverty, primary language other than English).				

EBIS Team Goals

	EBIS Feature	Indicate School-wide or Specific Grade and Group	Action to Be Taken (Be specific enough so that it is possible to determine when the action has been implemented.)
1			
2			