

2011 - 2012

Secondary

# EBIS Handbook



## Table of Contents

<b>Overview</b> .....	<b>1</b>
How the Effective Behavior and Instructional Support (EBIS) Process Works .....	2
EBIS Identification Process.....	5
EBIS Group Planning Form (Secondary Level) .....	6
Changes in Intervention In Secondary Schools .....	7
<b>Reading</b> .....	<b>8</b>
EBIS Reading Protocol – Grades 6-12 .....	9
EBIS Reading Decision Rules – Grade 6 - 12 .....	9
Progress Monitoring Guidance for Students Far Below Grade-Level Expectations .....	11
Secondary EBIS Student Intervention Profile – <u>READING</u> .....	12
Reading Placement Criteria-Fifth to Sixth Grade .....	13
Reading Placement Criteria - Eighth to Ninth Grade .....	14
Reading Placement Criteria – Students New to District .....	15
Reading Screening Form For Secondary Students New to TTSD .....	16
Secondary Literacy Placement Timeline .....	17
ELL Decision Rules for Placement in Reading Interventions .....	18
Planning for English Language Learners.....	19
<b>Behavior</b> .....	<b>21</b>
Secondary Standard Behavior Protocol.....	22
Secondary Standard Behavior Protocol Decision Rules .....	23
Procedures to Access Care Coordinator Services .....	24
Care Coordination Team Referral Form .....	26
Behavior Support Team Referral Form .....	28
Secondary EBIS Student Intervention Profile – <u>BEHAVIOR</u> .....	31
<b>Math</b> .....	<b>32</b>
EBIS Math Protocol – Grades 6-12.....	33
EBIS Standard Math Decision Rules – Grade 6-12 .....	34
6 <sup>th</sup> Grade Math Placement Decision Rules .....	36
9 <sup>th</sup> Grade Math Placement Decision Rules .....	37
Secondary EBIS Student Intervention Profile – <u>MATH</u> .....	39
<b>Individualizing and Intensifying Interventions</b> .....	<b>40</b>
Instructional Program Review Notice .....	41
Carta de Revisión Del Programa de Instrucción del Alumno .....	42
Parent RTI Brochure.....	43
RTI Manual para padres de familia .....	45
Developmental History .....	47
Historia del Desarrollo ( <i>Developmental History</i> ) .....	50
Individual Problem Solving Worksheet.....	54
<b>Sample Agendas, Surveys, and Supporting Documents</b> .....	<b>59</b>
Secondary EBIS School-Wide Meeting Guidelines.....	60
Secondary EBIS Intervention Placement Meeting Guidelines .....	62
Secondary EBIS Progress Monitoring and Intervention Planning Meeting Guidelines.....	63
Individualizing Meeting Guidelines .....	64
Secondary Schools Coaching Checklist.....	65
Secondary EBIS Team Planning Survey .....	67
TTSD Secondary EBIS Handbook Companion .....	72

# **Effective Behavior and Instructional Support (EBIS) Overview**

<b>How the Effective Behavior and Instructional Support (EBIS) Process Works .....</b>	<b>2</b>
<b>EBIS Identification Process.....</b>	<b>5</b>
<b>EBIS Group Planning Form (Secondary Level) .....</b>	<b>6</b>
<b>Changes in Intervention In Secondary Schools .....</b>	<b>7</b>

## How the Effective Behavior and Instructional Support (EBIS) Process Works In Secondary Schools

### 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 as well as monitor their progress. 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) weekly intervention monitoring meetings, and 5) individualizing-intensifying interventions.

**1. Team membership:** At the middle school level, leadership by the principal is essential. At the high school level, the associate principal often provides this leadership. EBIS Team membership also includes classroom teachers representing grade levels or subject areas, the Instructional Coordinator, Reading Specialist, School Counselor(s), and specialists from Special Education, Alternative Education, and ELL programs.

**2. Planning for All students (School-wide):** At least three times a year, (i.e., early fall, and at the end of the first, second, and/or third quarters), school-wide EBIS teams review data on student performance such as academic data (e.g., Maze-CBM, OAKS, ELPA, ACT, etc.), behavior referral data, grades, and attendance in order to evaluate the effectiveness of the "Core Programs". Data should be reviewed for "all students" including disaggregating results by race and program (i.e., SPED, ELL) to look for trends for school improvement. The following tools are available for use in this process:

- \* SWIS Year End Report
- \* Core Data Analysis (created at the end of each quarter for middles schools and each semester for high schools and found under Assessment in the Hood server)
- \* Data Warehouse (final marks, incidents, OAKS passing rate, attendance)

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 inspect Core Programs, foster difficult yet productive conversations about whether the core is meeting the needs of 80% of all students, and 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 at these school-wide meetings to ensure that fundamental organizational decisions can be made, resources can be allocated, instructional delivery is effective, and the program is delivered with fidelity.

**3. Planning for the 20% (Targeted groups):** The EBIS Group Planning Form, created quarterly and located in the assessment folder of the Hood Server, can be used to help identify students that are in need of

intervention and support. EBIS teams should keep a record of all students in interventions. The EBIS Group Planning Form may be used for this purpose. At the weekly EBIS meetings, teams choose interventions for groups of students with similar needs from the appropriate Standard Protocol (i.e. Reading, Behavior, etc.). They also decide on what progress data to collect and the person responsible for collecting the data. The EBIS Student Intervention Profile (located in IPAS) is initiated at this time for all students in interventions. A separate profile should be completed for each subject area, i.e., Reading, Math, or Behavior. This form should be updated in IPAS as changes are made to interventions and is the necessary record of a student's interventions. It is a required part of the documentation necessary to demonstrate whether a student has responded to instruction and is an integral part of a Special Education evaluation.

**4. EBIS Weekly Progress Monitoring meetings:** In middle schools, Grade Level EBIS teams meet every 4 to 6 weeks. In high schools, meetings occur weekly and have a different subject area focus each week (reading, math, behavior, etc.) EBIS teams identify students who need intervention based on the protocols by reviewing office disciplinary referrals (ODRs), attendance, and grades, and evaluate the progress of the students involved in group and individual interventions including those students receiving services through special education and ELL. The team reviews progress-monitoring data for each student, analyzing *aimlines* and *trendlines* (see "Decision Rules for Grades 6-12"). Using the decision rules, one of four different decisions may be made at these meetings for each student being reviewed:

- a. The group intervention has been successful and the student no longer needs it
- b. The intervention is working, but should be continued as it is necessary for continued success;
- c. The student has not made adequate progress in a Tier 2 Intervention during a semester. Prior to the end of the semester, the team should collect data in order to individualize and intensify the intervention (see #5 below). Based on the data collected, the student will likely be placed in a Tier 3 intervention the following semester (i.e., Language!) or the team will select another intervention change listed in the "*Changes to Interventions*" section on page 8.
  - a. If scores are entered into IPAS, a reminder will appear when decision rules indicate it is time for a change in intervention.
- d. The student has not made adequate progress during their second semester in a reading intervention; the team should initiate a referral for special education prior to the end of that semester.

**5. Individualizing, Intensifying Intervention:** If a student hasn't made adequate progress in a reading intervention during one semester, prior to placing the student in a reading intervention for a second semester, additional information *must* be gathered in order to develop an intervention that is specifically targeted to that student's needs. EBIS teams should complete the following:

- a. EBIS 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. See Planning for ELLs on pages 20 and 21.
- 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 the Functional Behavior Assessment protocol, 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, members of 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.

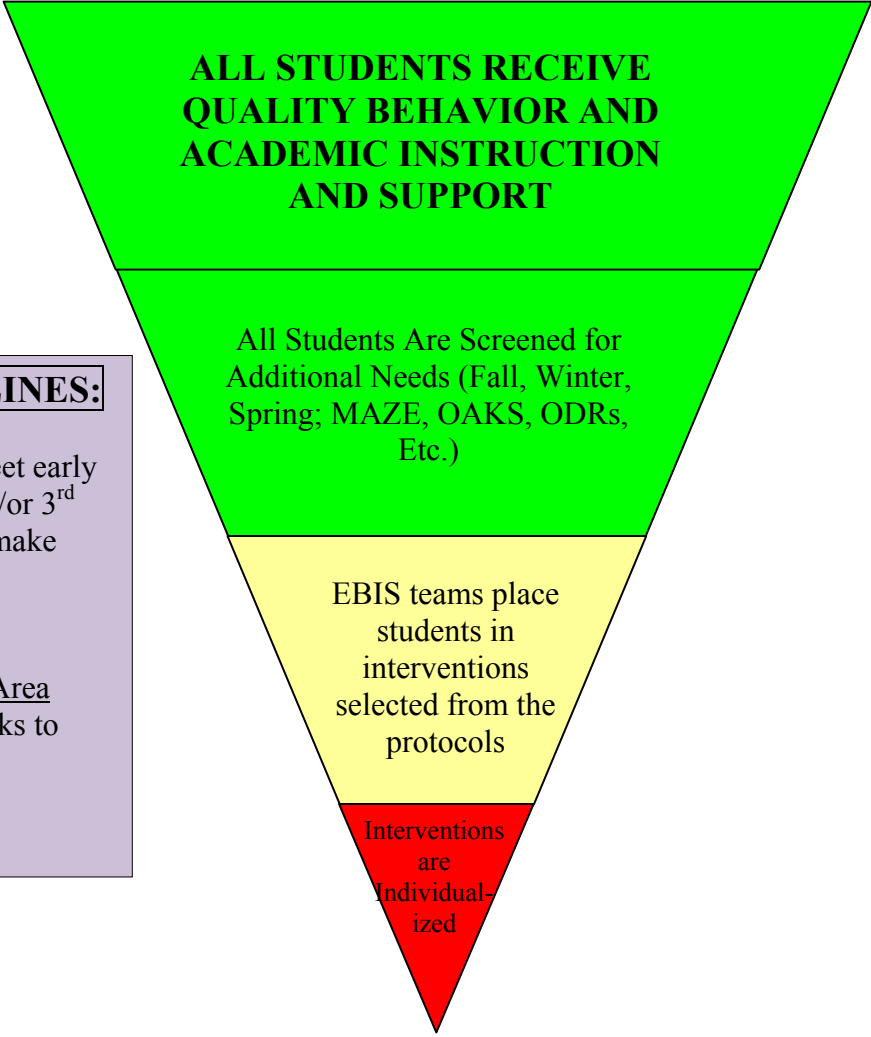
Prior to end of the semester, in the more intensive intervention, the team will determine whether:

- 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 intensity of the intervention should be reduced and progress should continue to be monitored.
- c. The student is making progress and should continue in the normal succession of the intervention programs. For example, students in Language! C would move to Language! D.
- d. The student has not made adequate progress and a referral for a formal special education evaluation should be initiated. 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**  
**Secondary Schools**  
**Tigard-Tualatin School District, Tigard, Oregon**

**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 based on school-wide screening measures, and/or with chronic behavior needs\* are discussed to determine the appropriate intervention.

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

**Refer for Special Education Evaluation Rule:** When students fail to make progress after 1 semester in the most intensive, instructionally appropriate intervention (e.g., Language!).

**TEAMWORK TIMELINES:**

EBIS School-wide teams meet early fall, and after the 1<sup>st</sup>, 2<sup>nd</sup>, and/or 3<sup>rd</sup> quarters to review data and make decisions about school-wide progress.

EBIS Grade level / Subject Area teams meet every 4 to 6 weeks to review data, plan and adjust interventions.

\* See Behavior Protocol



## **Changes in Intervention In Secondary 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. *Change* curriculum according to protocol if the current intervention is not addressing the student's needs based on additional assessment (phonics screener, core program assessment, intervention placement test, etc.).
2. *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.
3. Add a behavior plan and/or attendance intervention to increase instructional time, motivation and/or attention.

**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. In these instances, consult your EBIS coach.**

## Reading

<b>EBIS Reading Protocol – Grades 6-12 .....</b>	<b>9</b>
<b>EBIS Reading Decision Rules – Grade 6 - 12 .....</b>	<b>9</b>
<b>Progress Monitoring Guidance for Students Far Below Grade-Level Expectations .....</b>	<b>11</b>
<b>Secondary EBIS Student Intervention Profile – <u>READING</u> .....</b>	<b>12</b>
<b>Reading Placement Criteria-Fifth to Sixth Grade .....</b>	<b>13</b>
<b>Reading Placement Criteria - Eighth to Ninth Grade .....</b>	<b>14</b>
<b>Reading Placement Criteria – Students New to District .....</b>	<b>15</b>
<b>Reading Screening Form For Secondary Students New to TTSD .....</b>	<b>16</b>
<b>Secondary Literacy Placement Timeline .....</b>	<b>17</b>
<b>ELL Decision Rules for Placement in Reading Interventions .....</b>	<b>18</b>
<b>Planning for English Language Learners .....</b>	<b>19</b>

Tigard Tualatin School District Secondary EBIS Handbook  
**EBIS Reading Protocol – Grades 6-12**

Grade	Universal Screening Tools	Core Program	Second Tier Interventions	Third Tier Interventions
6-8	<ul style="list-style-type: none"> <li>MAZE</li> <li>Oregon Assessment of Knowledge &amp; Skills (OAKS)</li> </ul>	<ul style="list-style-type: none"> <li>HOLT – Elements of Literature</li> <li>Content Literacy Strategies Supported Throughout All Content Areas</li> <li>Literacy Strategies                             <ul style="list-style-type: none"> <li>Identify Text Structure</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Soar to Success                             <ul style="list-style-type: none"> <li>45 minutes/day</li> </ul> </li> <li>Six Minute Solution</li> </ul>	<ul style="list-style-type: none"> <li>Language!                             <ul style="list-style-type: none"> <li>90 minutes/day</li> </ul> </li> <li>Rewards                             <ul style="list-style-type: none"> <li>30-45 minutes/day</li> </ul> </li> <li>Corrective Reading</li> <li>Phonics for Reading (SPED only)</li> <li>Great Leaps (SPED Only)</li> <li>Edmark (SPED only)</li> <li>Success Maker (<u>only</u> in addition to Language! or Soar to Success)</li> </ul>
9-12	<ul style="list-style-type: none"> <li>Oregon Assessment of Knowledge &amp; Skills (OAKS)</li> </ul>	<ul style="list-style-type: none"> <li>Predictions</li> <li>Main Idea/Detail</li> <li>Inferences</li> <li>Visualization</li> <li>Summarizing</li> <li>Def. Word Chart</li> </ul>	<ul style="list-style-type: none"> <li>Read 180</li> <li>Six Minute Solution</li> </ul>	<ul style="list-style-type: none"> <li>Language!                             <ul style="list-style-type: none"> <li>90 minutes/day</li> </ul> </li> <li>Rewards</li> <li>Corrective Reading</li> <li>Great Leaps (SPED Only)</li> <li>Edmark (SPED only)</li> </ul>
<i>Who does this work?</i>	Instructional Coordinators	ALL STAFF	Language Arts Teachers / Reading Specialists/Others as needed	Reading Specialists, Special Education and ELL Teachers

**EBIS Reading Decision Rules – Grade 6 - 12**

***Identifying and Placing Students in Intervention***

- Students at each grade level scoring at or below 20 correct words on Maze-CBM, or not meeting on OAKS, are considered for further assessment to determine skill level, instructional needs, and appropriate placement in a reading intervention (See Reading Placement Criteria). Students meeting criteria will be placed in interventions and progress monitoring will begin.

*(continue decision rules on reverse side)*

## EBIS Reading Decision Rules – Grade 6 – 12 (continued)

### *Progress Monitoring*

- Progress monitoring will occur every other week with Maze measures for students in literacy interventions. Grade level material will be used to assess progress toward grade level goals.
  - See the following page for progress monitoring guidance for students *far below* grade-level expectations.

### *Individualizing and Intensifying Interventions*

Prior to the end of a student's **first** semester in a reading intervention, the EBIS team will consider individualizing and intensifying the intervention if:

- The student has 4 consecutive Maze-CBM scores below the aimline AND scores are below the 50<sup>th</sup> percentile.
- Maze-CBM trendline analysis of at least six data points indicates a flat or declining slope AND scores are below the 50<sup>th</sup> percentile.
- For ELL Students, 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.

Prior to selecting a more intensive intervention, i.e., prior to the end of the student's first semester in a reading intervention, the team should complete the individualization process by completing the following:

- EBIS 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.
- The school counselor should complete the Developmental History, through an interview with parents.
- 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.
- 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.
- Team members should meet with the above information and complete the Hypothesis Development page of the Problem Solving Worksheet.
- **Based on the data collected, the student will be placed in the most appropriately intensive intervention (i.e., Language!) the following semester.**

### *Refer to Special Education for a potential Specific Learning Disability in reading*

- If prior to the end of the **second** semester in a reading intervention, the Maze-CBM data continues below the aimline and scores are below the 50<sup>th</sup> percentile.
- The student is making some progress in reading but the team determines that the support is so significant that the student will need continued individual and intensive instruction.

### *Exiting Interventions*

- Students may exit intervention if:
  - there are 4 consecutive Maze scores above the aimline and they are at or above the 50<sup>th</sup> percentile, and
  - the student meets the grade level benchmark on OAKS.

## Progress Monitoring Guidance for Students Far Below Grade-Level Expectations

- For students whose reading skills are well below grade level (typically students in Special Education), 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 educations).
- The team may determine that it is appropriate to monitor less frequently in grade level material (i.e., monthly, or 3 times per year) in cases in which the student has previously been identified with a learning disability, or in other situations in which data for high-stakes decisions is not needed.
- 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.
  - For most secondary students, Maze-CBM will continue to be the measure of choice as it will meet these criteria and is directly connected to Maze-CBM screening measures. For students with more significant deficits, the DIBELS Oral Reading Fluency measures may be used.
  - Suggested Maze-CBM probes to use with students in Language! (in addition to on grade-level probes):
    - 1<sup>st</sup> Grade for Book A,
    - 2<sup>nd</sup> Grade for Book B,
    - 5<sup>th</sup> Grade for Book C,
    - 8<sup>th</sup> Grade for Books D-F

**Secondary EBIS Student Intervention Profile – READING**  
**Can be completed in IPAS**

**Student Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **ID Number:** \_\_\_\_\_

**Initial Data Information:**      **Initial Grade Level:** \_\_\_\_\_

Attach Maze Progress Monitoring Graph.

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 of Health Room Visits in past month: \_\_\_\_\_

<p><b>Intervention #1 SOAR:</b> ____ <b>Language!</b> ____ <b>Read 180:</b> ____ <b>Other:</b> _____</p> <p>Start Date: _____ Current Grade Level: _____</p> <p>Curriculum: _____</p> <p>Group Size:      6-15: ____ 15-30: ____ Class: ____</p> <p>Frequency:      <b>Daily</b> ____ <b>Every Other Day</b> ____</p> <p>Duration:      45 min.: ____ 60 min.: ____ Other: ____</p> <p>Intervention Teacher: License Reg: ____ License Spec.: ____ Other: _____</p> <p>End Date: _____ <b>Attach Progress Monitoring Data</b></p> <p><b>Print and attach the Attendance Summary for this intervention period.</b></p>
---

<p><b>Intervention #2 SOAR:</b> ____ <b>Language!</b> ____ <b>Read 180:</b> ____ <b>Other:</b> _____</p> <p>Start Date: _____ Current Grade Level: _____</p> <p>Curriculum: _____</p> <p>Group Size:      6-15: ____ 15-30: ____ Class: ____</p> <p>Frequency:      <b>Daily</b> ____ <b>Every Other Day</b> ____</p> <p>Duration:      45 min.: ____ 60 min.: ____ Other: ____</p> <p>Intervention Teacher: License Reg: ____ License Spec.: ____ Other: _____</p> <p>End Date: _____ <b>Attach Progress Monitoring Data</b></p> <p><b>Print and attach the Attendance Summary for this intervention period.</b></p>
---

<p><b>Intervention #3 SOAR:</b> ____ <b>Language!</b> ____ <b>Read 180:</b> ____ <b>Other:</b> _____</p> <p>Start Date: _____ Current Grade Level: _____</p> <p>Curriculum: _____</p> <p>Group Size:      6-15: ____ 15-30: ____ Class: ____</p> <p>Frequency:      <b>Daily</b> ____ <b>Every Other Day</b> ____</p> <p>Duration:      45 min.: ____ 60 min.: ____ Other: ____</p> <p>Intervention Teacher: License Reg: ____ License Spec.: ____ Other: _____</p> <p>End Date: _____ <b>Attach Progress Monitoring Data</b></p> <p><b>Print and attach the Attendance Summary for this intervention period.</b></p>
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## Reading Placement Criteria-Fifth to Sixth Grade

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

*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.*

## Reading Placement Criteria - Eighth to Ninth Grade

Class	Placement Criteria
Regular Language Arts	<ul style="list-style-type: none"> <li>• Meets or exceeds on OAKS</li> </ul>
Regular Language Arts/Watch List	<ul style="list-style-type: none"> <li>• Does not meet on OAKS</li> <li>• Maze above 27</li> </ul>
Read 180	<ul style="list-style-type: none"> <li>• Does not meet on OAKS, but scores above the 10<sup>th</sup> percentile on OAKS (RIT score 223 or above)</li> <li>• Maze between 18 and 27</li> </ul>
LANGUAGE!	<ul style="list-style-type: none"> <li>• OAKS score at or below the 10<sup>th</sup> percentile (RIT score 222 or below)</li> <li>• Maze below 18</li> <li>• LANGUAGE! Placement Test indicating a for A or C</li> </ul>

*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 high school is necessary.*

## Reading Placement Criteria – Students New to District Middle School and High School

Class	Placement Criteria
Regular Language Arts	<ul style="list-style-type: none"> <li>• Meets or exceeds on OAKS</li> </ul>
Regular Language Arts/Watch List	<ul style="list-style-type: none"> <li>• Does not meet on OAKS</li> <li>• Fluency at or above 120</li> <li>• Accuracy rate at or above 95%</li> <li>• SRAI: 0-5 errors on the two passages</li> <li>• Maze above 27</li> </ul>
Read 180	<ul style="list-style-type: none"> <li>• Does not meet on OAKS</li> <li>• Maze between 18 and 27</li> <li>• Fluency at or above 120</li> <li>• Accuracy rate at or above 95%</li> <li>• SRAI: 6 or more errors on the two passages</li> </ul>
LANGUAGE!	<ul style="list-style-type: none"> <li>• Does not meet on OAKS</li> <li>• Maze below 18</li> <li>• Fluency at or below 120</li> <li>• Accuracy rate at or below 94%</li> <li>• SRAI: 6 or more errors on the two passages</li> <li>• LANGUAGE! Placement Test indicating a need for A or C</li> </ul>

**OR**

### For Students New To The District, High School Only

**Have the new student take the SRI assessment from Read 180 and use the results of that assessment along with other factors to determine appropriate placement.**

Class	Placement Criteria
Regular Language Arts	<ul style="list-style-type: none"> <li>• SRI at or above 1060L</li> </ul>
Regular Language Arts/Watch List	<ul style="list-style-type: none"> <li>• SRI between 970L and 1055L</li> </ul>
Test further using the above placement criteria to determine whether to place student in Read 180 or Language!	<ul style="list-style-type: none"> <li>• SRI at or below 965L</li> </ul>

## Reading Screening Form For Secondary Students New to TTSD

New Student _____	Yearly Screening _____
-------------------	------------------------

Student: _____	Date: _____
----------------	-------------

School: _____	Grade: _____
---------------	--------------

Previous School Info: _____	LAS/ELPA Total Score _____
-----------------------------	----------------------------

Name: _____	Oral Lang. Score _____
-------------	------------------------

IEP: <input type="checkbox"/> Yes <input type="checkbox"/> No	ELL: <input type="checkbox"/> Yes <input type="checkbox"/> No	504: <input type="checkbox"/> Yes <input type="checkbox"/> No
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<b>File Review Information:</b>
---------------------------------

a. State Testing RL _____ th Grade %tile: _____ th Grade %tile:
---

b. Grades: _____
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c. Level of Classes: _____
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<b>Reading Conference Information:</b>
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<b>Screening Data:</b>
------------------------

ORF Median Score: _____	ORF Median Accuracy: _____
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SDQ Instructional Level Score: _____
--------------------------------------

SRAI SDQ Level Passage Score: _____ Level Passage Score: _____
--

LANGUAGE! Placement Test:      Level A      Level C      Level E
--

DRP                                  GLE                                  Lexile
--

SRI/Read 180: _____
---------------------

MAZE Score (baseline): _____
------------------------------

Other: _____
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<b>Placement Recommendation:</b>
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Counselor Consulted: _____	Others Consulted: _____
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<b>Final Placement Decision:</b>
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Program: _____
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Teacher: _____	Start Date: _____
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## Secondary Literacy Placement Timeline

### *Middle School to High School Transition*

**Purpose:** Teaming around student data and making consistent, evidence-based decisions are key principles to an effective EBIS process and to ensuring efficient and proper placement as students transition from middle school to high school.

<b>Action</b>	<b>By When</b>
<p><b>Data to be given by MS IC to HS IC</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Give preliminary number <b>and names</b> of existing/potential SLP student placement to HS IC.</li> </ul>	March 31
<p><b>Data to be compiled by the Assessment Department (<i>EBIS Group Planning Form</i>)</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Best OAKS Reading and Literature scores from previous and current year</li> <li><input type="checkbox"/> Two MAZE scores from current year</li> <li><input type="checkbox"/> Grades in core classes</li> <li><input type="checkbox"/> Explore scores (by percentiles)</li> <li><input type="checkbox"/> ELPA</li> <li><input type="checkbox"/> Absences</li> <li><input type="checkbox"/> ODR</li> </ul>	Updated after end of Q3
<p><b>Data to be compiled by the MS Instructional Coordinator (<i>added to EBIS Group Planning Form and returned to Assessment Department</i>)</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Current Reading Placement</li> <li><input type="checkbox"/> Suggested High School Reading Placement / Notes</li> <li><input type="checkbox"/> <i>Assessment Department sends this updated form to the High School</i></li> </ul>	April 30  <i>May 4</i>
<p><b>MS IC Updates EBIS Group Planning Form</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Middle School Instructional Coordinator and Reading Specialist at each school review data and conduct further screening and diagnostics as needed.</li> <li><input type="checkbox"/> Assess students falling below the 35%ile on OAKS</li> <li><input type="checkbox"/> MAZE</li> <li><input type="checkbox"/> GRADE + (only given to SLP students)</li> <li><input type="checkbox"/> Suggested Placement and/or Notes (for ALL students below 35%ile)</li> <li><input type="checkbox"/> Send updates to Assessment Department so it can be transferred to the high schools</li> </ul>	May 18-31
<p><b>Transition Placement Meeting</b></p> <p>Instructional Coordinators at middle level are to bring final placement recommendations and supporting data to the meeting. At the transition placement meeting, the team will review the recommendations and make needed changes.</p> <p><u>Transition Team Members:</u></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Middle School IC, High School IC, HS Reading Specialist and/or Reading Teacher(s)</li> </ul>	By June 1

## **ELL Decision Rules for Placement in Reading Interventions New Students/Yearly Screening**

1. Gather the following data:
  - Latest OAKS R/LA RIT score
  - Latest LAS/ELPA scores
2. If the OAKS score is at or above the 36%tile then place student in regular Language Arts.
3. If the OAKS score is equal to or below the 35%tile then check the student's ELPA score: (use LAS if no ELPA score)
  - If the student has a 1 (beginner) or 2 (early intermediate) then consider the following:
    - Has the student been in ELL for more than 3 years?
    - What is his or her oral language score?
      - If the student has been in ELL for more than 3 years than proceed with normal screening regardless of the oral language score. (If the oral score is a 1 or 2 the EBIS team should be looking closely at this student and planning for instruction and possible evaluation for a language disorder.)
      - If the student has been here less than 3 years and he or she has an ELPA speaking score of 1 or 2 then place the student in ELD and screen using Language! 4<sup>th</sup> edition placement test.
4. IF students screen into the LANGUAGE! Program, do the following:
  - In Middle School, Place students scoring 1- 3 in the same class with an ELL Language! teacher using Language! 4<sup>th</sup> edition Redband based on the results of the placement test.
  - In High School place in Language! 4<sup>th</sup> edition.
  - Place students scoring a 4 or 5 with any LANGUAGE! teacher based on results of placement test.

The numbers referred to above correspond with the following ELPA levels.

- 1 Beginner
- 2 Early Intermediate
- 3 Intermediate
- 4 Early Advanced
- 5 Advanced

## 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).

## **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.

## Behavior

<b>Secondary Standard Behavior Protocol .....</b>	<b>22</b>
<b>Secondary Standard Behavior Protocol Decision Rules .....</b>	<b>23</b>
<b>Procedures to Access Care Coordinator Services .....</b>	<b>24</b>
<b>Care Coordination Team Referral Form.....</b>	<b>26</b>
<b>Behavior Support Team Referral Form .....</b>	<b>28</b>
<b>Secondary EBIS Student Intervention Profile - <u>BEHAVIOR</u>.....</b>	<b>31</b>

## Secondary Standard Behavior Protocol (Fall, 2011)

Grade Level(s)	Universal Screening Tools	Core Program	Second Tier Interventions	Third Tier Interventions
6-12	<ul style="list-style-type: none"> <li>• Office Discipline Referrals</li> <li>• Attendance Reports</li> <li>• Suspension/Expulsion Data</li> <li>• Oregon Healthy Teens Survey</li> <li>• Social Marketing Surveys</li> <li>• School-wide Evaluation Tool (SET)</li> <li>• Benchmarks of Quality</li> <li>• School Safety Survey</li> <li>• Self-Assessment Survey</li> <li>• Course Grades</li> </ul>	<ul style="list-style-type: none"> <li>• School Rules &amp; Behavior Expectations Are Explicitly Taught to <u>ALL</u> Students</li> <li>• All Students Regularly &amp; Consistently Acknowledged for Demonstrating Behavior Expectations</li> <li>• All Students Reliably Corrected When Behavior Expectations Are Not Demonstrated. Positive Behavior Expectation Re-taught &amp; Reinforced Immediately.</li> <li>• School-wide Social/Emotional Curriculum Delivery (e.g., Too Good For Drugs &amp; Violence)</li> <li>• Bully prevention curriculum such as Expect Respect.</li> </ul>	<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"> <li>• Re-Teach Expectations</li> <li>• Check-in / Check-out</li> <li>• Strategic “Positive Referrals” for Identified Students</li> <li>• Adult Mentoring</li> <li>• Peer Mentoring</li> <li>• Targeted Social/Emotional/Behavioral Skills Groups, such as curriculum follow-up with Too Good for Drugs/Violence</li> <li>• Advisory Classes</li> <li>• Strategic Tutoring</li> <li>• Participation in Parent Training Program (Strengthening Families)</li> </ul>	<p>Core + Second Tier <b>and...</b></p> <ul style="list-style-type: none"> <li>• Functional Behavior Assessment &amp; Individual Behavior Support Plans</li> <li>• Individualized Behavior Goals and Progress Monitoring</li> <li>• Care Coordination</li> <li>• Juvenile Court Counseling</li> <li>• Connections/SRT</li> </ul>
<i>Who does this work?</i>	EBIS / EBS Teams	EBS Teams & ALL STAFF	Appropriate Staff as Determined by EBIS Teams (Principals, Counselors, and School Psychologists direct this process).	Appropriate Staff Decided by EBIS Teams (Principals, Counselors, and School Psychologist direct this process)

**Review the Core**

- Office Discipline Referral Data reviewed monthly. If more than 1 referral per day per month for every 250 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)**

## Secondary Standard Behavior Protocol Decision Rules (Page 2)

### Decision Rules:

- Place Students in Tier 2 intervention if:
  - Student has two or more Office Discipline Referrals in a three-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 plan.
  - Student has two or more Fs or a GPA < 1.4.
- Progress monitoring:
  - Monitor Office Discipline Referrals (ODRs), absences, and grades.
  - Behavior data from Check-in Check-out programs
  - Progress on individual behavior goals or Behavior Support Plan.

**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 pages 29-31).**

- Place students in Tier 3 intervention **AND** have Red Zone Team monitor if:
  - Progress is below the expected rate after 6 to 8 weeks of Second Tier Intervention. (Perform a Functional Behavior Assessment (FBA) and develop a Behavior Support Plan (BSP)).
  - Student receives 6 or more behavior referrals within the year. Perform an FBA & develop a BSP and consult with the Care Coordinator and/or Juvenile Court Counselor, if applicable.
  - There is a significant concern regarding mental health issues or anti-social behavior or serious concerns about family support.
  - Student's behavior poses a potential risk to self or others (place in intervention and then perform FBA).

**All students in Tier 3 Interventions must have a Functional Behavioral Assessment (FBA) and Behavior Support Plan (BSP) and be monitored by the Red Zone Team.**

- **In some instances, students might be referred to the Red Zone Team prior to initiating the FBA/BSP process if complex mental health, safety 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](mailto: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

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#### **Greg Rush, MSW**

Phone: 503-710-7186

Email: [gregr@lifeworksnw.org](mailto: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

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#### **Pam Sturtevant, MA**

Phone: 971-207-7181

Email: [pams@lifeworksnw.org](mailto:pams@lifeworksnw.org)

Fax: 503-431-5010

#### **SCHOOLS**

Fowler Middle School

**All Spanish-speaking elementary referrals**

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#### **Jose Alvarez, MA**

Phone: 503-382-9624

Email: [josea@lifeworksnw.org](mailto: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?

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

**Care Coordination Team Referral Form – Page 2**

<b>Imminent Warning Signs (<u>high</u> risk factors/behaviors)</b>	
<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

<b>Student Name:</b>	<b>If the student is eligible under IDEA:</b>
School:	Case Manager: <span style="float: right;">Phone:</span>
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

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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

## Secondary EBIS Student Intervention Profile – BEHAVIOR

Can be completed in IPAS

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_ ID Number: \_\_\_\_\_

Initial Data Information: Initial Grade Level: \_\_\_\_\_

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 of Health Room Visits in past month: \_\_\_\_\_

### Intervention #1

Start Date: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

Targeted Skill: \_\_\_\_\_

Program/Curriculum (From Behavior Protocol): \_\_\_\_\_

Group Size: Individual: \_\_\_\_ 2-3: \_\_\_\_ 5-8: \_\_\_\_ Class: \_\_\_\_

Frequency: Once/Wk: \_\_\_\_ Twice/Wk: \_\_\_\_ Daily: \_\_\_\_ Other: \_\_\_\_

Duration: 10 min.: \_\_\_\_ 15 min.: \_\_\_\_ 20 min.: \_\_\_\_ 30 min.: \_\_\_\_ Other: \_\_\_\_

End Date: \_\_\_\_\_ Attach Progress Monitoring Data

Notes:

Please print and attach the Attendance Summary for this intervention period.

### Intervention #2

Start Date: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

Targeted Skill: \_\_\_\_\_

Program/Curriculum (From Behavior Protocol): \_\_\_\_\_

Group Size: Individual: \_\_\_\_ 2-3: \_\_\_\_ 5-8: \_\_\_\_ Class: \_\_\_\_

Frequency: Once/Wk: \_\_\_\_ Twice/Wk: \_\_\_\_ Daily: \_\_\_\_ Other: \_\_\_\_

Duration: 10 min.: \_\_\_\_ 15 min.: \_\_\_\_ 20 min.: \_\_\_\_ 30 min.: \_\_\_\_ Other: \_\_\_\_

End Date: \_\_\_\_\_ Attach Progress Monitoring Data

Notes:

Please print and attach the Attendance Summary for this intervention period.

### Intervention #3

Start Date: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

Targeted Skill: \_\_\_\_\_

Program/Curriculum (From Behavior Protocol): \_\_\_\_\_

Group Size: Individual: \_\_\_\_ 2-3: \_\_\_\_ 5-8: \_\_\_\_ Class: \_\_\_\_

Frequency: Once/Wk: \_\_\_\_ Twice/Wk: \_\_\_\_ Daily: \_\_\_\_ Other: \_\_\_\_

Duration: 10 min.: \_\_\_\_ 15 min.: \_\_\_\_ 20 min.: \_\_\_\_ 30 min.: \_\_\_\_ Other: \_\_\_\_

End Date: \_\_\_\_\_ Attach Progress Monitoring Data

Notes:

Please print and attach the Attendance Summary for this intervention period.

## Math

<b>EBIS Math Protocol – Grades 6-12</b> .....	<b>33</b>
<b>EBIS Standard Math Decision Rules – Grade 6-12</b> .....	<b>34</b>
<b>6<sup>th</sup> Grade Math Placement Decision Rules</b> .....	<b>35</b>
<b>9<sup>th</sup> Grade Math Placement Decision Rules</b> .....	<b>36</b>
<b>Secondary EBIS Student Intervention Profile – <u>MATH</u></b> .....	<b>37</b>

### EBIS Math Protocol – Grades 6-12

Grade	Universal Screening Tools	Core Program	Second Tier Interventions	Third Tier Interventions
6-8	<ul style="list-style-type: none"> <li>• Oregon Assessment of Knowledge &amp; Skills (OAKS)</li> <li>• In Course Assessment</li> <li>• Course Grades</li> <li>• Portland Prognostic (Algebra Readiness Test)</li> <li>• 5<sup>th</sup> to 6<sup>th</sup> Placement Test</li> </ul>	<p>Holt Mathematics</p> <p>College Preparatory Math</p> <p>Placement in appropriate grade level course, see <i>Placement Decision Rules on the following page.</i></p>	<ul style="list-style-type: none"> <li>• Carnegie Cognitive Tutor delivered in Math Lab in addition to core math class</li> <li>• For 8<sup>th</sup> Graders, placement in Pre-Algebra 2. This could also include Carnegie Cognitive Tutor delivered in Math Lab. See <i>Middle School Placement Decision Rules</i></li> </ul>	<ul style="list-style-type: none"> <li>• Grades 6-8, placement in Success-Maker in addition to core math class.</li> </ul>
9-12	<ul style="list-style-type: none"> <li>• Oregon Assessment of Knowledge &amp; Skills (OAKS)</li> <li>• In Course Assessment</li> <li>• Course Grades</li> <li>• Portland Prognostic (Algebra Readiness Test)</li> </ul>		<ul style="list-style-type: none"> <li>• Carnegie Cognitive Tutor delivered in Math Lab in addition to core math class</li> </ul>	<ul style="list-style-type: none"> <li>• Placement in below grade level math class in addition to Carnegie Cognitive Tutor delivered in Math Lab. See <i>High School Placement Decision Rules</i></li> <li>• <i>Trans Math</i> for 9<sup>th</sup> Graders only</li> </ul>
<b>Who does this work?</b>	Math instructors with the EBIS team	Math STAFF	Math Teachers, Special Education Teachers	Math Teachers, Special Education Teachers

## EBIS Standard Math Decision Rules – Grade 6-12

### ***Identifying and Placing Students in Intervention:***

Specific Guidelines for placement in interventions for math are unique for each grade level as indicated on the *Math Placement Decision Rules*. In general place students in an intervention if they:

- Do not meet benchmark on OAKS
- Failing grades on course assessments
- Teacher Recommendation
- Math Placement Test
- Progress monitoring data indicate that the student is not making adequate progress

Students meeting criteria will be placed in interventions and progress monitoring will begin.

### ***Progress Monitoring***

- Progress monitoring will occur through Student Report Assessments embedded in the Carnegie math curriculum.
- Grade level material will be used to assess progress toward grade level goals.

### ***Individualizing and Intensifying Interventions***

Prior to the end of a student's **first** semester in a math intervention, the EBIS team will consider individualizing and intensifying the intervention if:

- The student has 4 consecutive CBM scores below the aimline AND scores are below the 50<sup>th</sup> percentile.
- CBM trendline analysis of at least six data points indicates a flat or declining slope AND scores are below the 50<sup>th</sup> percentile.

Prior to selecting a more intensive intervention, i.e., prior to the end of the student's first semester in a math intervention, the team should complete the individualization process by completing the following:

- EBIS 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.
- The school counselor should complete the Developmental History, through an interview with parents.
- 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.
- 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.
- Team members should meet with the above information and complete the Hypothesis Development page of the Problem Solving Worksheet.
- **Based on the data collected, the student will be placed in the most appropriately intensive intervention the following semester.**

### ***Refer to Special Education for a potential Specific Learning Disability in math***

- If prior to the end of the **second** semester in a math intervention, the CBM data continues below the aimline and scores are below the 50<sup>th</sup> percentile.
- The student is making some progress in math but the team determines that the support is so significant that the student will need continued individual and intensive instruction.



Tigard-Tualatin School District  
**6<sup>th</sup> 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.

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

**\*Assessments:**

- 5/6 Placement Exam given to all 5<sup>th</sup> grade students prior to 6<sup>th</sup> 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.*

**Tigard-Tualatin School District**  
**9<sup>th</sup> 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.*

**Placement in Algebra 2: must meet 3 of the following criteria**

- Successful completion of Geometry with an overall course grade of **80%** or better
- Test scores in Geometry of **80%** or better
- 8<sup>th</sup> grade OAKS score of **241** or better
- Successfully completed, District Geometry End of Course Exam with a score of **80%** or greater
- Teacher Recommendation

**Placement in Geometry: must meet 3 of the following criteria**

- Successful completion of Algebra with an overall course grade
  - of **B** or better
- OR**
- Successful completion of Algebra with an overall course grade of **C** or better **AND**
- Test scores in Algebra of **75%** or better
- 8<sup>th</sup> grade OAKS score of **230** or better
- Successfully completed ~~placement exam~~ District Algebra End of Course Exam with a score of **70%** or greater
- Teacher Recommendation

**Placement in Algebra: must meet 3 of the following criteria**

- Successful completion of Pre-Algebra/8<sup>th</sup> grade math with an overall course grade of **≥ 60%**
- Test scores in Pre-Algebra/8<sup>th</sup> grade math of **60%** or better
- 8<sup>th</sup> grade OAKS score of **221 (and making gains)** or better
- Successfully completed Algebra Readiness exam, with a score of **15** or greater
- Teacher Recommendation

**Placement in Trans Math: must meet 3 of the following criteria**

- Completion of Pre-Algebra/8<sup>th</sup> Grade Math with a grade of **59% and below**
- Test scores in Pre-Algebra/8<sup>th</sup> Grade Math of **59% and below**
- 8<sup>th</sup> grade OAKS score between **221-206, if below this level, referred to EBIS team.**
- Completed Algebra placement exam, scoring between **0-14**
- Teacher Recommendation

**Placement in Math Support Lab – In addition to core math class: must meet 3 of the following criteria**

- Completion of Pre-Algebra/8<sup>th</sup> Grade Math with a grade of **74%– 60%**
- Test scores of **74%-60%**
- 8<sup>th</sup> grade OAKS score between **221-229**
- Completed Algebra Readiness exam scoring between **15 to 23**
- Teacher Recommendation *and* Math lab descriptors

**Math Lab Descriptors:** *descriptors of students who will benefit from math lab*

- Shy and does not ask questions but needs help
- Would do homework with a little push and some time set aside
- Student who does homework but does it incorrectly
- Students who need a lot of math help outside of class

- Students with some intrinsic motivation who need some one-on-one support

## Secondary EBIS Student Intervention Profile – MATH Can be completed in IPAS

**Student Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **ID Number:** \_\_\_\_\_

**Initial Data Information:**      **Initial Grade Level:** \_\_\_\_\_

Attach Math Progress Monitoring 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 of Health Room Visits in past month: \_\_\_\_\_

**Intervention #1 Carnegie Cognitive Tutor:** \_\_\_ **Other:** \_\_\_\_\_

Start Date: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

Curriculum: \_\_\_\_\_

Group Size:      6-15: \_\_\_ 15-30: \_\_\_ Class: \_\_\_

Frequency:      **Daily** \_\_\_ **Every Other Day** \_\_\_

Duration:      45 min.: \_\_\_ 90 min.: \_\_\_ Other: \_\_\_

Intervention Teacher: License Reg: \_\_\_ License Spec.: \_\_\_ Other: \_\_\_\_\_

End Date: \_\_\_\_\_ **Attach Progress Monitoring Data**

**Print and attach the Attendance Summary for this intervention period.**

**Intervention #2 Carnegie Cognitive Tutor:** \_\_\_ **Other:** \_\_\_\_\_

Start Date: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

Curriculum: \_\_\_\_\_

Group Size:      6-15: \_\_\_ 15-30: \_\_\_ Class: \_\_\_

Frequency:      **Daily** \_\_\_ **Every Other Day** \_\_\_

Duration:      45 min.: \_\_\_ 90 min.: \_\_\_ Other: \_\_\_

Intervention Teacher: License Reg: \_\_\_ License Spec.: \_\_\_ Other: \_\_\_\_\_

End Date: \_\_\_\_\_ **Attach Progress Monitoring Data**

**Print and attach the Attendance Summary for this intervention period.**

**Intervention #3 Carnegie Cognitive Tutor:** \_\_\_ **Other:** \_\_\_\_\_

Start Date: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

Curriculum: \_\_\_\_\_

Group Size:      6-15: \_\_\_ 15-30: \_\_\_ Class: \_\_\_

Frequency:      **Daily** \_\_\_ **Every Other Day** \_\_\_

Duration:      45 min.: \_\_\_ 90 min.: \_\_\_ Other: \_\_\_

Intervention Teacher: License Reg: \_\_\_ License Spec.: \_\_\_ Other: \_\_\_\_\_

End Date: \_\_\_\_\_ **Attach Progress Monitoring Data**

**Print and attach the Attendance Summary for this intervention period.**

## Individualizing and Intensifying Interventions

Documents to be used prior to selecting the individualized intervention

<b>Instructional Program Review Notice .....</b>	<b>39</b>
<b>Carta de Revisión Del Programa de Instrucción del Alumno .....</b>	<b>40</b>
<b>Parent RTI Brochure .....</b>	<b>41</b>
<b>RTI Manual para padres de familia .....</b>	<b>43</b>
<b>Developmental History .....</b>	<b>45</b>
<b>Historia del Desarrollo (<i>Developmental History</i>) .....</b>	<b>48</b>
<b>Individual Problem Solving Worksheet.....</b>	<b>52</b>

**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.

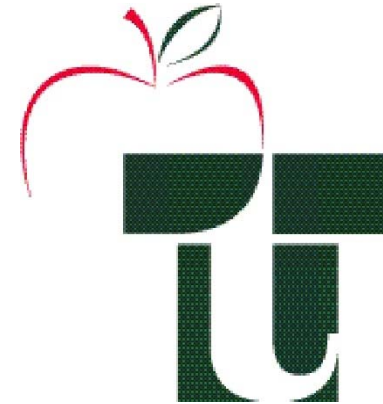
## *Response to Intervention (RTI)*

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

Tigard Tualatin School District Secondary EBIS Handbook

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 está 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 está 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) está 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 está 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.

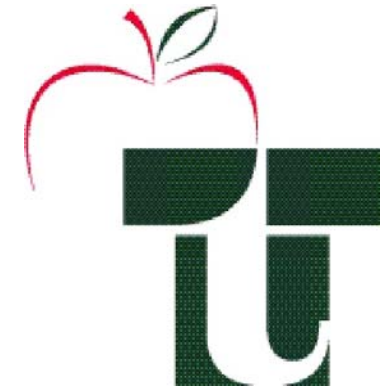
## *Respuesta a la Intervención (RTI)*

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

1. How often did you see a doctor while you were pregnant? Regularly \_\_\_ A few times \_\_\_ Not at all \_\_\_
2. Were you sick or did you have any complications while you were pregnant? Yes \_\_\_ No \_\_\_  
If yes, what did you have? \_\_\_\_\_
3. Did you have measles or any other childhood disease while you were pregnant? Yes \_\_\_ No \_\_\_  
If yes, what did you have? \_\_\_\_\_
4. Did you have trouble giving birth? Yes \_\_\_ No \_\_\_ (Premature birth, complications, concerns at birth?)  
If yes, please explain \_\_\_\_\_  
\_\_\_\_\_
5. Was your child born in a hospital? Yes \_\_\_ No \_\_\_
6. 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

7. 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: \_\_\_\_\_  
\_\_\_\_\_
8. Does the child have any brothers or sisters? If so, list ages, gender. \_\_\_\_\_  
\_\_\_\_\_
9. Who lives in the home? (Parents, siblings, grandparents, etc.) \_\_\_\_\_  
\_\_\_\_\_
10. 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 \_\_\_\_\_
11. Do people outside the family easily understand what your child says? Yes \_\_\_ No \_\_\_  
If no, please tell about it. \_\_\_\_\_  
\_\_\_\_\_
12. 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*)

- ¿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)
- ¿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?*) \_\_\_\_\_
- ¿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?*) \_\_\_\_\_
- ¿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*); : \_\_\_\_\_
- ¿Nació su hijo/a en un hospital? (*Was your child born in a hospital?*)  Si (Yes)  No
- ¿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*)

- ¿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), entrenaminto de baño (2-3 años) en general en limites 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 si, por favor explique (*If yes, please explain*): \_\_\_\_\_
- ¿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.*) \_\_\_\_\_
- ¿Quien vive en casa? (padres, hermanos, abuelos, etc.) (*Who lives in the home? {parents, siblings, grandparents, etc}*) \_\_\_\_\_
- ¿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?*)     Si (*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?     Si (*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?     Si (*Yes*)  No  
(*had to go to the hospital because of a temperature?*)
  - c. ¿ha perdido la consciencia? (*ever been knocked unconscious?*)     Si (*Yes*)  No
  - d. ¿ha tenido una concusión cerebral? (*ever had a concussion?*)     Si (*Yes*)  No
  - e. ¿ha tenido algún tipo de cirugía? (*ever had any kind of surgery?*)     Si (*Yes*)  No
  - f. ¿ha visitado un hospital por cualquier otra enfermedad que no ha sido mencionada arriba?  Si (*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?*)     Si (*Yes*)  No
  - h. ¿ha tenido dolor de oídos frecuentemente? (*had frequent earaches?*)     Si (*Yes*)  No  
Si sí, ¿se instalaron tubos? (*if yes, were tubes installed?*)     Si (*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?*)     Si (*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?*)     Si (*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?*)     Si (*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)?*)     Si (*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?*)     Si (*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, indigencia, 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, cuáles 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	<b>Ex</b> -PSF: 1.3 phonemes/wk <b>Amb</b> -PSF: 1.9 phons./wk	<b>Ex</b> -NWF: 1 CLS/wk <b>Amb</b> -NWF: 1.25 CLS/wk <b>Ex</b> -ORF: 1.5 words/week <b>Amb</b> -ORF: 1.9 words/week	<b>Ex</b> -ORF: 1.1 words/wk <b>Amb</b> -ORF: 1.6 words/wk	<b>Ex</b> -ORF: .9 words/wk <b>Amb</b> -ORF: 1.4 words/wk	<b>Ex</b> -ORF: .8 words/wk <b>Amb</b> -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	<b>Ex</b> -ORF: .6 words/wk <b>Amb</b> -ORF: 1.1 words/wk OAKS: 5 points	<b>Ex</b> -ORF: .7 words/wk <b>Amb</b> -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 Progress Monitoring 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
<b>COMPOSITE BENCHMARK</b>	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.
<b>STUDENT SCORE</b> (Note areas of concern by traits)			

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

**Identify Areas of Instructional Need**

Check Area of Concern	Individualized Intervention: Curriculum	Time: From Reading Protocol	Other Intervention Change (such as group size, behavior plan, etc. from page 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.

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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.

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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.

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## Sample Agendas, Surveys, and Supporting Documents

<b>Secondary EBIS School-Wide Meeting Guidelines .....</b>	<b>58</b>
<b>Secondary EBIS Intervention Placement Meeting Guidelines .....</b>	<b>59</b>
<b>Secondary EBIS Progress Monitoring and Intervention Planning Meeting Guidelines .....</b>	<b>60</b>
<b>Individualizing Meeting Guidelines .....</b>	<b>61</b>
<b>Secondary Schools Coaching Checklist .....</b>	<b>62</b>
<b>Secondary EBIS Team Planning Survey .....</b>	<b>64</b>
<b>TTSD Secondary EBIS Handbook Companion.....</b>	<b>69</b>

## Secondary EBIS School-Wide Meeting Guidelines

### Purpose:

To determine the effectiveness of the core program and make necessary adjustments if it is not meeting the needs of most students.

### Team Membership:

- Principal/Associate Principal
- Instructional Coordinator/Reading Teacher
- Counselor
- ELL Representative
- Special Education Representative
- Alternative Education Representative
- Grade Level or Subject Area Teacher Representatives

### Meeting Tips:

- Use a projector or wall chart to display student data
- Meet only if the essential team members are present
- Designate roles (timekeeper, facilitator, note taker)
- Remind the team that the focus of the meeting is general education and ensuring that all students are making growth
- Review the purpose
- Stick to the agenda and protocol
- Organize the data before the meeting
- Celebrate successes

### Examine the Data:

Attendance  
OAKS

MAZE  
Grades

Behavior (ODRs, counseling referrals)

- Are 80% or more of your students meeting benchmark?
- Are ALL subgroups making growth? (Grade Level, Course/Class, Ethnicity, SLP, ELL, Sped)
- Have you set ambitious goals for the next quarter?

**Yes:** Celebrate!      **No:** Discuss the following questions about the core program.

### Discussion Guidelines:

#### Reading, Math and Writing

- 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)
- What are homework policies, expectations, and support? Do they need revision? Support?

#### Attendance

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

#### Behavior

- Is the following in place: a school-wide behavior policy, a behavior curriculum and an EBS team?
- 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 or an office managed referral?
- Are there classroom and school-wide behavior incentive systems?

- How are homework policies, expectations, and support articulated? Do they support all students?

## Secondary EBIS Intervention Placement Meeting Guidelines

### Purpose:

To determine which students are in need of intervention, select appropriate interventions, and schedule interventions/progress monitoring.

### Team Membership:

- Principal/Associate Principal
- Instructional Coordinator/Reading Teacher
- Counselor
- ELL Representative
- Special Education Representative
- Alternative Education Representative
- Grade Level or Subject Area Teacher Representatives

### Meeting Tips:

- See Tips from the School-wide Meeting Guidelines

### Examine the Data:

#### Reading and Math

- Prior to the meeting, use OAKS and MAZE or other Curriculum Based Measures to identify students for further assessment who meet screening criteria from the protocol.
- Prior to the meeting complete placement assessment.
- Examine the data and place the student in the appropriate intervention.
- Determine what will be used to measure progress, how often, and who will be responsible for data collection. When will the team reconvene to review student progress?

#### Behavior

- ODRs
  - Review behavior data and identify students with 2 or more discipline or counseling referrals.
- Attendance
  - Review attendance data and identify students with more than 5 absences in a 30-day period.
- Grades
  - Review the D & F List (located in your assessment folder on the server) and identify students with 2 or more F's or a GPA < 1.4
- Examine the data and place the student in the appropriate intervention.
- Determine what will be used to measure progress, how often, and who will be responsible for data collection. When will the team reconvene to review student progress?

## Secondary EBIS Progress Monitoring and Intervention Planning Meeting Guidelines

### **Purpose:**

To review progress monitoring for all students in interventions and make decisions about whether to proceed with, discontinue, or change an intervention.

### **Team Membership:**

- Principal/Associate Principal
- Instructional Coordinator/Reading Teacher
- Counselor
- ELL Representative
- Special Education Representative
- Alternative Education Representative
- Grade Level/Content Area Team (20% Meetings Only)

### **Meeting Tips:**

- See Tips from the School-wide Meeting Guidelines

### **Examine the Data:**

#### *Before meeting:*

Sort progress monitoring data into three groups (be sure to use decision rules to form the groups):

- 1) Students making sufficient progress
- 2) Students who need a modification to an intervention
- 3) Students ready to proceed to intensive intervention

#### *During meeting:*

- 1) Quickly review students making sufficient progress, determine if any student(s) should discontinue intervention. Celebrate successes!
- 2) Discuss groups or individual students in need of an intervention change. Determine what intervention change is needed based on the student's performance, the appropriate protocol, and the Change in Intervention guidelines (page 24).
- 3) Note intervention changes on the Student Intervention Profile form either in IPAS or on a hard copy.

## Individualizing Meeting Guidelines

### **Purpose:**

To review student information (progress monitoring, *Problem Solving Worksheet*, *Developmental History*, and other relevant documentation) and use it to plan an intensive, individualized intervention designed to meet the student's specific needs. This should occur prior to the end of a student's first semester in a reading intervention if the student isn't making adequate progress.

### **Team Membership:**

The team for this meeting should include members most knowledgeable about the student and most directly involved in providing intervention to the student.

- Intervention Teacher
- Counselor
- ELL Representative if ELL student
- A Classroom Teacher
- Other EBIS team members as appropriate

### *Before meeting:*

- 1) Use pages 1 to 3 of the *Individual Problem-Solving Worksheet* to conduct a thorough file review
- 2) Counselor or school psychologist uses the *Developmental History* to interview parents
- 3) ELL Teacher collects all relevant learning and language information on ELL students
- 4) Invite parents to meeting and/or solicit their input

### *During meeting:*

- 1) Review above data, progress-monitoring data from previous interventions, and in-program assessments.
- 2) Complete page 4 of the *Individual Problem-Solving Worksheet* to guide intervention planning.
- 3) Plan/modify individually designed intervention.

## Secondary Schools Coaching Checklist

School: \_\_\_\_\_ Grade Level/Domain \_\_\_\_\_ Date: \_\_\_\_\_

Team Members: \_\_\_\_\_

Observer: \_\_\_\_\_

Status				Feature	Comment
In Place	Partially In Place	Not in Place	Not Observed		
<b>Observable Features</b>					
				1. Team is made up of the Principal, Counselor, Grade level teachers, Lit Specialist/Title 1, and Specialists from Sp. Ed. & ELL.	
				2. School principal is an active participant on the EBIS team.	
				3. Team plots and analyses progress-monitoring data on students falling below the 20%ile on MAZE.	
				4. Team identifies and/or reviews progress-monitoring data on students who have more than 2 ODRs, since the last meeting or more than 5 for the year.	
				5. Team identifies and/or reviews progress-monitoring data on students who have failed 2 or more classes or have a GPA < 1.4 during any quarter.	
				6. Team identifies students who have 5 or more absences since the previous meeting.	
				7. Teams use the protocols (Reading and Behavior) to make decisions on interventions, data to be collected, and person responsible for collecting data.	
				8. Students in interventions (academic and behavior) are progress monitored regularly, based on the protocol.	
				9. Grade Level/Domain teams meet every 4 to 6 weeks to review progress-monitoring data on students in interventions.	
				10. Team analyzes cohort data and language level data for ELL students in interventions.	
				11. <b>Decision rules</b> are followed and changes to interventions are made based on aimline/trendline analysis.	
				12. Meeting agenda is generated primarily from student performance data rather than teacher referral.	
				13. Only those changes to interventions listed on the <b>Intervention Changes and Modifications Form</b> are considered as changes.	

**EBIS Coaching Checklist: Secondary Schools**

School: \_\_\_\_\_ Grade Level/Domain: \_\_\_\_\_ Date: \_\_\_\_\_

People Interviewed: \_\_\_\_\_

Interviewer: \_\_\_\_\_

Status			Feature	Comment
In Place	Partially In Place	Not in Place		
<b>Determine through Interview</b>				
			1. The <b>EBIS Group Intervention &amp; Planning Form</b> is completed and lists students who are below the 20 <sup>th</sup> percentile on MAZE, or who meet criteria for interventions in behavior, and/or attendance.	
			2. The <b>EBIS Student Intervention Profile</b> is started for each student receiving an intervention and is updated when new interventions are implemented.	
			3. Daily data is collected for students in behavioral or attendance interventions.	
			4. Parents are notified when their child is placed in an intervention or when there has been a change in intervention	
			5. Students in reading interventions are progress monitored bi-weekly with MAZE.	
			6. Prior to developing an individualized intervention (see Reading Protocol), the team collects additional information about the student in order to plan the individualized intervention. This information includes:	
			a. The <b>EBIS Team Meeting Notice</b> is sent to parents	
			b. A Case Manager is assigned to ensure that all required tasks are completed.	
			c. A <b>Developmental History</b> is obtained	
			d. The <b>RTI Process Brochure</b> is given to parents.	
			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 uses the Planning for English Language Learners document to plan interventions.	
			f. The <b>EBIS Individual Problem Solving Worksheet</b> 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 <b>Reading Protocol</b> or other relevant protocol to determine the appropriate Tier III intervention for the student.	
			7. If MAZE data continues to be below the aimline after one semester in Language!, a referral to Special Education is considered.	
			8. The <b>EBIS Student Intervention Profile, Developmental History Form, Progress Monitoring Data, and the Individual PS Worksheet</b> are attached to the Special Ed Referral Form.	
			9. 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 subject area.	
			10. Results of the triennial review are shared with grade level teams and changes are made as needed based on the data.	

## Secondary EBIS Team Planning Survey

School: \_\_\_\_\_

Date: \_\_\_\_\_

Name(s) and position(s) of survey participants: \_\_\_\_\_

EBIS Features	Rating			Notes for Goal Setting
	Not in Place	Partially in Place	Fully in Place	
<b>1. Team Membership and Process: Building Level</b>				
a. EBIS teams include administrator, special education representative, literacy/reading specialist, counselor and/or psychologist, classroom teachers, and ELL teacher.				
b. Administrator, teachers, and representatives from special education, counseling, and ELL attend <b>every</b> meeting.				
c. Grade level (or content/regional) teams meet regularly every four to six weeks.				
d. Building administrator 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 interventions for that week's focus (academic area or grade level being reviewed.) Decision rules from the appropriate protocol (reading, behavior, math) are used to guide changes in interventions.				
h. The building's screening process quickly identifies new students who meet placement criteria and places them in appropriate interventions.				
i. EBIS meetings run efficiently and 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				
k. At least 2 times per year, teams review the effectiveness of the core program, by reviewing the Core Data Analysis provided in the Assessment folder on the Hood Server.				

<b>EBIS Features</b>	<b>Rating</b>			
<b>1. Team Membership and Process: Building Level (Continued)</b>	<b>Not in Place</b>	<b>Partially in Place</b>	<b>Fully in Place</b>	<b>Notes for Goal Setting</b>
l. If less than 80% of students are at benchmark in any area (reading, grades, math, behavior), teams discuss and plan for changes to the implementation of the core program. Data is analyzed based on grade level, program (ELL, Special Education, Secondary Literacy Program), and ethnicity.				
m. The minutes from the 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)				
<b>2. Core Instructional Program</b>	<b>Not in Place</b>	<b>Partially in Place</b>	<b>Fully in Place</b>	<b>Notes for Goal Setting</b>
a. A core reading program (Holt) is implemented consistently at your school and is delivered for a minimum of 45 minutes a day across all grades.				
b. Language! is scheduled for 90 minutes per day.				
c. New teachers receive initial training in the core reading curriculum and returning teachers receive yearly refresher courses.				
d. Teachers have ready access to high quality additional support (e.g., peer coaching, classes) as needed.				
e. Teachers have received sufficient support to adjust the implementation of the core program based on students' skills, while still maintaining fidelity to the program.				
f. Building principal conducts frequent observations of classroom teachers to ensure effective instruction.				
g. Building principal monitors what is taught to ensure core curriculum, common Language Arts assessments, and district priority standards are being taught with fidelity.				
h. Assessments from the core program are administered and reviewed to guide decisions about student placement.				
i. At least 90% of teachers in your school regularly use the district's research-based literacy strategies and regularly incorporate reading as part of their core instruction.				

<b>EBIS Features</b>	<b>Rating</b>			
<b>3. Screening and Progress Monitoring Procedures</b>	<b>Not in Place</b>	<b>Partially in Place</b>	<b>Fully in Place</b>	<b>Notes for Goal Setting</b>
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-monthly according to protocol for all students receiving interventions.				
c. Building staff is thoroughly trained and skilled in data analysis and interpretation.				
<b>4. Reading Decision Rules</b>	<b>Not in Place</b>	<b>Partially in Place</b>	<b>Fully in Place</b>	<b>Notes for Goal Setting</b>
a. All EBIS team members understand Reading decision rules and have access to the protocol.				
b. Prior to the end of a student's first semester in a reading intervention, the EBIS team considers individualizing and intensifying the intervention if: *Data indicates 4 consecutive points below the aimline or a trendline of at least six data points that indicate a flat or declining slope AND * Scores are below the 50 <sup>th</sup> percentile.				
c. Prior to selecting a more intensive intervention, i.e., prior to the end of the student's first semester in a reading intervention, the team completes the individualization process by completing the following: 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.				
<b>5. Reading Interventions</b>	<b>Not in Place</b>	<b>Partially in Place</b>	<b>Fully in Place</b>	<b>Notes for Goal Setting</b>
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. 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.				

EBIS Features	Rating			
5. Reading Interventions (Continued)	Not in Place	Partially in Place	Fully in Place	Notes for Goal Setting
d. The Student Intervention Profile is kept up to date in IPAS for each student in an intervention, with accurate program information and start and end dates for interventions.				
6. 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 after a strategic behavioral intervention, a Functional Behavioral Assessment (FBA) is completed and a Behavior Support Plan developed.				
7. LD Eligibility	Not in Place	Partially in Place	Full in Place	Notes for Goal Setting
a. Referrals are <b>always</b> accompanied by appropriate documentation (e.g., progress monitoring data, intervention information, student intervention profile, developmental history, problem solving worksheet)				
b. Students are referred for a special education evaluation if they fail to make adequate progress in the most intensive intervention (Language!) (unless extenuating circumstances are present).				
c. The team refers a student to RMT to consider a special education evaluation: <ul style="list-style-type: none"> <li>• If prior to the end of the second semester in a reading intervention, the Maze-CBM data continues below the aimline and scores are below the 50<sup>th</sup> percentile. Or</li> <li>• If the student is making some progress in reading but the team determines that the support is so significant that the student will need continued individual and intensive instruction.</li> </ul>				

<b>EBIS Features</b>	<b>Rating</b>			
	<b>Not in Place</b>	<b>Partially in Place</b>	<b>Fully in Place</b>	<b>Notes for Goal Setting</b>
<b>8. Parent Participation</b>				
a. A system is in place that ensures that parents regularly receive screening and progress monitoring data.				
b. Parents are consistently notified when students begin or change interventions due to lack of progress.				
c. Parents receive the TTSD RTI Brochure when their child is about to begin the individualized intervention.				
d. Input from parents is 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

Team members: \_\_\_\_\_

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

## TTSD Secondary EBIS Handbook Companion

**School:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Principal:** \_\_\_\_\_

EBIS Features	In Place	Plan for Adjustment
<b>1. Team Membership and Process</b>		
a. Principal, classroom teachers, literacy/reading specialist, counselor and/or psychologist, special education representative, and ELL teacher attends EBIS meetings.		
b. EBIS grade-level/content area teams meet at least monthly to monitor student progress and make changes to student programs as needed.		
c. Meeting agendas are driven by student data & decision rules rather than teacher referral.		
d. The <i>EBIS Student Intervention Profile</i> is started for each student receiving an intervention and is updated when new interventions are implemented.		
e. Meetings include review of progress monitoring data (IPAS, SWIS) for students in interventions.		
f. Only interventions listed on the protocols (or on the <i>Intervention Changes and Modifications Form</i> ) are used.		
g. At least 3 times per year, the EBIS leadership team reviews the effectiveness of the core program.		
h. If less than 80% of all students (or students in any subgroup i.e., special program, ethnicity, grade level), are at benchmark in reading, grades, math or behavior, teams discuss and plan for changes to the implementation of the core program.		
<b>2. Core Literacy Program</b>		
a. A core reading program (e.g., Holt) is implemented consistently at your school and is delivered for a minimum of 45 minutes a day across all grades.		
b. Tier 3 Interventions (e.g., Language!) is scheduled for 90 minutes per day		
c. Building administration monitors fidelity of core curriculum and interventions.		
<b>3. Behavior and Attendance Concerns</b>		
a. Attendance and behavior records are reviewed at least monthly and students who meet the decision rules are placed into behavioral interventions.		
b. Students placed in a Tier 3 behavioral intervention are referred to the Red Zone Team, including students with 6 or more Office Discipline Referrals or if there is a significant concern regarding mental health issues.		
<b>4. Decision Rules</b>		
a. Screening data (e.g., Maze) are used to identify students in need of intervention		

according to the protocols.		
b. Decision rules from the appropriate protocol (reading, math, behavior) are used to make changes in interventions.  (For Example, the protocol indicates that prior to the end of a semester, the EBIS team uses the decision rules to decide whether to individualize and intensify in the next semester.)		
c. Prior to a Tier 3 intervention (or a student's second semester in a reading intervention if initially placed in Tier 3), the following are completed/updated if the student is failing to make progress:		
1. Developmental History,		
2. Student Intervention Profile,		
3. The RTI Brochure is sent to parents,		
4. Individual Problem Solving Worksheet.		
d. The EBIS team uses all the above information to complete page four of the <i>Individual Problem Solving Worksheet</i> .		
<b>5. English Language Learners</b>		
a. The ELL Specialist provides data on ELL students.		
b. Team uses the "Intervention and Decision Guidelines for English Language Learners" when designing interventions.		
c. Cohort data is reviewed when evaluating ELLs progress.		
<b>6. LD Eligibility</b>		
a. The team refers a student to RMT to consider a special education evaluation: *If prior to the end of the second semester in a reading intervention, the Maze-CBM data continues below the aimline and scores are below the 50th percentile, OR *The level of instructional support the student has received over time in order to demonstrate minimal progress in reading is significant, individual, and intense.		
b. Referrals are always accompanied by the following documentation: 1. Progress monitoring data, 2. <i>Student Intervention Profile</i> , 3. <i>Developmental History</i> , 4. <i>Individual Problem Solving Worksheet</i> , 5. Additional documentation needed for ELL students		