



“IDEA and the Multi-level Prevention System”

Slide 1: Welcome to the webinar, “IDEA and the Multi-level Prevention System.” This is one of 11 webinars developed by the National Center on Response to Intervention (NCRTI). This webinar takes a closer look at how the multi-level prevention system relates to special education. I’m Lou Danielson, and I’m going to be the facilitator for this PowerPoint. I am a senior advisor for NCRTI, and I also direct the National Center on Intensive Interventions. Prior to my work at the American Institutes for Research, I served for approximately 30 years at the Office of Special Education Programs in the U.S. Department of Education.

Slide 2: NCRTI has developed a series of webinars to cover information that is important for Response to Intervention (RTI) implementation. On this slide you can see the different webinars available in the series. While you can watch the webinars in any sequence, we recommend that you first watch “What Is a Multi-level Prevention System?” webinar so that you have a general understanding of the multi-level prevention system. Following this webinar, learn more about how to select evidence-based interventions.

If you have not already done so, print out the vocabulary handout, which will be useful for your note taking throughout the webinar. Also notice that there is a video corresponding to this webinar that answers the question, “How does RTI differ from previous approaches to providing interventions?” I recommend viewing this video immediately following the webinar.

Slide 3: One helpful way to check your understanding throughout the webinar is to complete the accompanying vocabulary handout. The handout provides a table with a list of key terms on the left side with columns to the right side for you to track your understanding before and after viewing the webinar. Before viewing the webinar, you should make predictions about the meanings of each term. Then, throughout the webinar, you will complete the final meaning column, based on the definitions provided, along with the picture/sketch/example column. You can see how in this example, I was able to clarify the meaning of primary prevention level after watching the webinar.

If you have not already made predictions for the key terms of this webinar, please go ahead and pause the webinar so that you can do so now. Press play when you are ready to continue.

Slide 4: When thinking about how the levels of the multi-level prevention system and RTI relate to IDEA, it is important to remember that

- An RTI process cannot be used to delay an evaluation for eligibility under IDEA,



- Students with disabilities must be identified in a “timely manner,” and
- Long-term secondary prevention cannot be used as an alternative for providing services without an IEP [individualized education program] to a student with a disability. (And in fact, long-term tertiary intervention could not be used for providing services to a student without an IEP who has a disability.)

I want to emphasize in this slide the importance of timeliness, because we’ve heard that often students may enter into an intervention for many weeks before being considered as having a disability, often with limited responsiveness to the intervention that’s being provided.

Slide 5: What about special education?

Two groups to consider:

1. Students who are already identified and currently eligible for and receiving special education
2. Students being considered or referred for special education eligibility consideration

Slide 6: What about students who are currently classified as having disabilities?

Although the design of the RTI model implemented is up to the state education agency (SEA), or in some instances to a local education agency (LEA), it is recommended that special education staff and students with disabilities are included in the development and the implementation of the multi-level system. In this model, students with disabilities continue to receive access to the core curriculum through accommodations, differentiated instruction, and other support. Then, depending on the services outlined in the IEP, students may receive ongoing secondary (unlike short-term secondary) support or intensive, individualized services delivered by the special education teacher. Thus, complete removal from the core curriculum is not typically recommended because students are assessed against grade-level standards. In this scenario, the secondary or tertiary intervention is essentially supplemental to and supports the core instruction. In some instances, this can be seen as a double dosage, as kids may get their core reading instruction and additional instruction to supplement or augment that. And this is compared to a model where students don’t receive core instruction but during that period of time receive supplemental instruction. In my view, that’s a model that should generally be avoided and is not generally consistent with the principles of RTI, in which secondary intervention is seen as supplemental to core instruction.

Slide 7: Disability identification. Federal law states, “To ensure that underachievement in a child suspected of having a specific learning disability is not due to lack of appropriate instruction in reading or math, the group must consider” two things. The first one is whether there are “data



that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate instruction in regular education settings.” Screening data that assess the growth rate of all students can help you answer this question. Progress monitoring data that can be shared with parents can support the next piece: “data-based documentation of repeated assessments of achievement at reasonable intervals.”

It has always been the case that in order to identify a student as having learning disabilities, one needed to rule out the possibility that his or her lack of achievement was due to inadequate or inappropriate instruction. The regulations following the old law have really codified that requirement and basically connected it to Response to Intervention.

Slide 8: When do we refer to special education? I’m going to provide a couple of examples of how this can be done and how different folks have approached this.

When students are referred, whether it is after nonresponsiveness to secondary interventions or nonresponsiveness to tertiary interventions, it must be in accordance with state law and/or district policies. If your state does not clearly indicate when to refer students, it is important to develop a district model that is in accordance with federal and state law. As seen in the previous slides, there is no one model for when special education referrals occur. As a brief aside, it’s important to keep in mind that regardless of what the state and local rules are regarding when a teacher or school day staff person might do a referral, that the parents, under federal law and regulations, have the right to refer their child at any point in the process.

In this first example, which is based on models from Doug and Lynn Fuchs, it shows that referral to special education occurs after nonresponsiveness to two evidence-based secondary interventions. In this model, responsiveness to tertiary instruction is a component of the comprehensive evaluation. It is important to point out that in this model, tertiary instruction is considered to be special education. If effective, 80 percent of students should be benefitting from the specialized services that they receive—that is, 80 percent of the 15 percent who are identified.

Slide 9: When do we refer to special education? A second example. In this example, based on examples from sites across the country, the district model indicates that referral to special education occurs after a student demonstrates nonresponsiveness to one evidence-based secondary intervention (e.g., 8–12 weeks), and then nonresponsiveness to a more intense tertiary intervention. In this model, data demonstrating the provision of appropriate instruction in general education settings includes progress monitoring data collected from both the secondary and



tertiary interventions. Presumably, in this model, the student is not sufficiently responsive to secondary intervention, and again, is not sufficiently responsive to tertiary intervention, and at that point under this model, the student might be referred for the special education evaluation.

Slide 10: Recommendations. Across both examples, it is important that there is collaboration between special education and regular education in order to develop an inclusive multi-level prevention model for students. Both of these examples are appropriate for referral to special education, but a lack of consistency in their implementation across a district can create inconsistency and inequity in service delivery models. Districts should provide clear guidance about where the referral process fits within the multi-level prevention system, the roles and responsibilities of special education staff, when students should be referred for eligibility consideration, and the role of parents and parent notification in this process. For those of you who are interested in additional information, particularly related to the policy guidance that the Office of Special Education Programs has provided, we also have on the NCRTI website another webinar called RTI and LD Identification, which provides a much more intensive review of all of the policy letters and the relevant statutory provisions important to keep in mind if one goes about using RTI, particularly as it relates to identifying kids with learning disabilities.

Slide 11: Thank you for your interest in the work of the Center and for your attentiveness to this webinar. We look forward to you visiting our website to take advantage of other resources available. Thank you very much.