Identifying Students with Specific Learning Disabilities in a Response to Intervention Model

Presented by Dr. Jack Fletcher
Texas Center for Learning Disabilities

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Welcome!

- Texas Center for Learning Disabilities Webinar Series
  - #1: TCLD Website Tour
  - #2: SLD and RTI
  - More to come covering other TCLD research topics!

- Archived webinars are available on www.texasldcenter.org/video/

Texas Center for Learning Disabilities

- Located across three organizations
  - University of Houston
  - The University of Texas at Austin
  - The University of Texas Health and Science Center at Houston
- Project Investigators include:
  - Jack Fletcher*
  - David Francis
  - Carolyn Denton
  - Sharon Vaughn
  - Andrew Papanicolaou

TCLD Research Projects

- Project I (Classification)
- Project II (Early Identification)
- Project III (Remediation)
- Project IV (Magnetic Source Imaging)

- For more information, see www.texasldcenter.org

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Identifying Students with SLD in a RTI Model

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The Texas Center for Learning Disabilities (TCLD) investigates the classification, early intervention, and remediation of learning disabilities.

What is Response to Intervention?

RTI is not:

- Just a special education initiative
- Only for students with disabilities
- Only for beginning reading
- Only for non-Title I and non-ESL students
- A new way to identify students with SLD
- A way of reducing costs or eliminating special education or the LD category
- This year's summer reform or a short-term implementation based on "RTI in a Box"
- A way to fix schools with weak core instruction

Response to Intervention is:

- A set of processes for coordinating high quality service delivery in schools
- A multi-tiered, layered instructional approach that prevents problems first, and then brings increasingly intense interventions to students who don't respond
- Making instructional decisions based on data
- Integrating entitlement programs with general education
- Providing relevant data for SLD identification
- Primary goal: Improving academic and behavioral outcomes for all students by eliminating discrepancies between actual and expected performance

Components of RTI

- Universal, population- based screening and progress monitoring; decision-making based on data to modify instruction
- Implementation of evidence- based interventions in general education classroom with supplemental and intensive intervention
- A coordinated, seamless system of service-delivery connecting prevention and remediation
- Parent involvement and team-based decision-making
- Data that provides information relevant to eligibility for special education

Special Education

- Special education MUST BE part of the continuum of services. IDEA services reserved for students with instructional needs so intense they cannot be provided in general education (or the student needs the protections of IDEA)
- Special education services should facilitate prevention; IDEA permits 15% of Part B funds for EIS
- Eligibility and referal linked to outcomes of previous tiers, but can occur at any stage
- In a RTI model, itinerant professionals change from experts on placement to experts on monitoring instructional response and determining intervention strategies

Comprehensive Evaluation

- IDEA 2004 requires a comprehensive evaluation
- Allows more flexibility- little evidence supporting extensive assessments of IQ, cognitive skills, and processes: focus on academic and behavioral strengths and weaknesses
- In a RTI model, student comes to interdisciplinary team with data that is one necessary part of the evaluation- goal is determine if special ed is best intervention
- More emphasis on writing an effective IEP
- Progress monitoring continues

IDEA 2004: RTI or Discrepancy? A Special Ed Perspective

- (2)(i) The child does not make sufficient progress to meet age or State-approved grade-level standards in one or more of the [8 domains of achievement] when using a process based on the child's response to scientific, research-based intervention; or
- (ii) The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State-approved grade-level standards, or intellectual development, that is determined by the group to be relevant to the identification of a specific learning disability, using appropriate assessments, consistent with §§300.304 and 300.305;

What's Wrong With IQ-Discrepancy?

- IQ- discrepant and non- discrepant low achievers do not differ significantly in behavior, achievement, cognitive skills, response to instruction, and neurobiological correlates once definitional variability accounted (Siegel, 1992; Stuebing et al., 2002).
- IQ does not predict intervention response (Stuebing et al., 2009).
- Status models cannot be reliable based on a single assessment (Francis et al., 2005)

Low Achievement Model

- Designate a cut point on the achievement dimension
- Strengths: Strong validity, linked to intervention, easy to implement
- Weaknesses: Cut point, does not measure the underlying construct (can't differentiate subgroups of poor readers when the cause is known to be related to emotional difficulty, economic disadvantage, and inadequate instruction)
- Necessary but not sufficient: *Status models based on a single assessment will never be reliable*

Cognitive Processing Discrepancies

- Processing subtypes weakly related to intervention outcomes; NO evidence that knowledge of cognitive strengths and weaknesses facilitates intervention
- No additional information not found in achievement profiles; Connor et al. (Science, 2007): academic profiles differentially predict intervention outcomes

New Alternatives: Response to Instruction (Intervention)

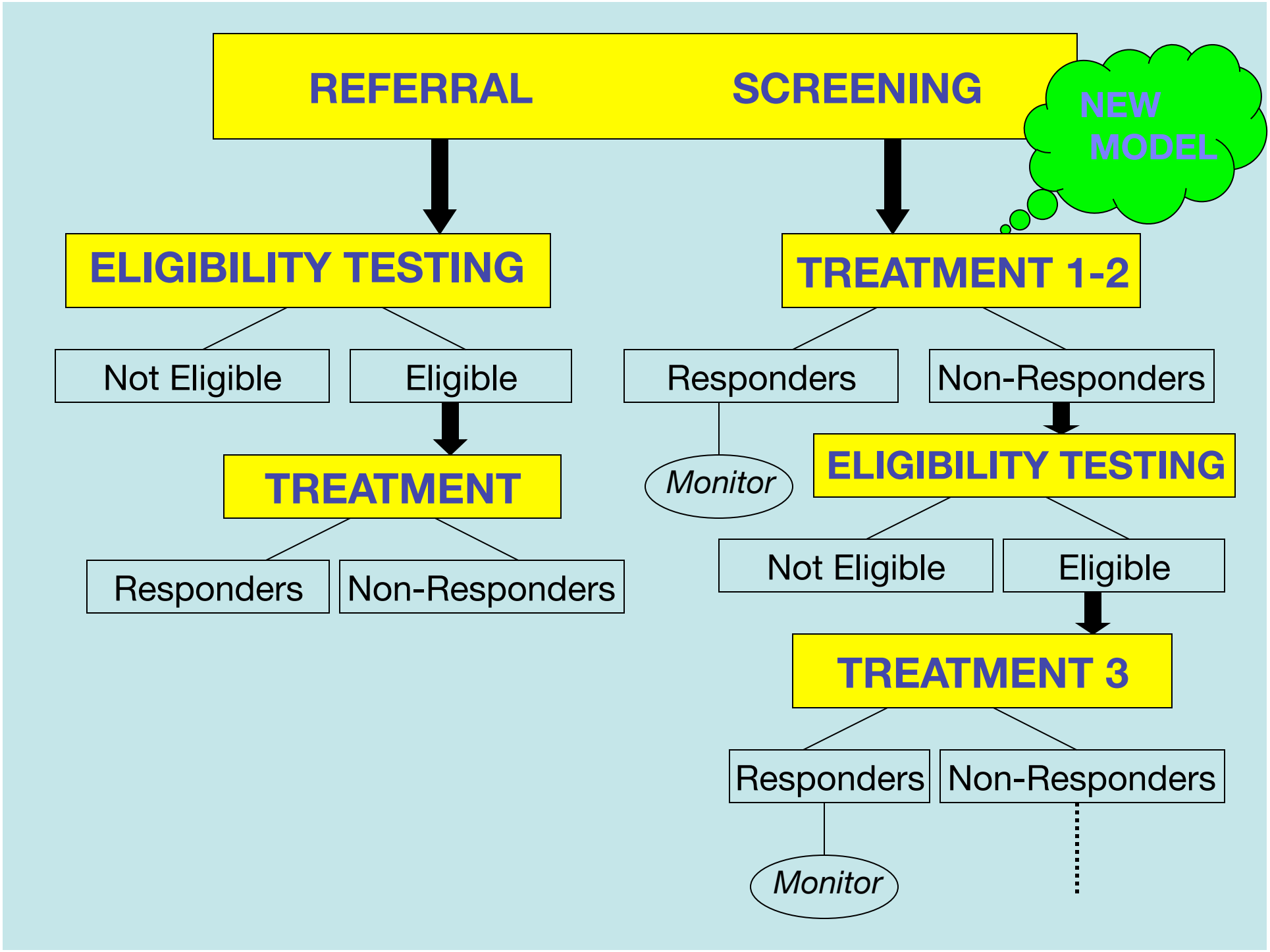
- Universal screening and serial curriculum-based assessments of learning in relation to instruction
- Identification is more reliable than when based on a single assessment
- As one criterion, student may be LD if they do not respond to instruction that works with most students (i.e., unexpected underachievement)
- May identify a unique subgroup of underachievers that reflects an underlying classification that can be validated (Al- Otaiba & Fuchs, 2002; Vellutino et al., 2003)
- School-wide change- not just enhanced pre-referral services

IDEA 2004: Inadequate instruction is an exclusion

To ensure that underachievement…is not due to lack of appropriate instruction in reading or math, the group must consider…

(1) Data that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate instruction in regular education settings, delivered by qualified personnel; and

(2) Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.


REFERRAL
SCREENING
NEW MODEL
ELIGIBILITY TESTING
TREATMENT 1-2
Not Eligible
Eligible
Responders
Non-Responders
TREATMENT
Monitor
ELIGIBILITY TESTING
Responders
Non-Responders
Not Eligible
Eligible
TREATMENT 3
Responders
Non-Responders
Monitor

LD Summit: Hybrid Model for Identification

- 1. Evaluate Response to Instruction
- 2. Establish Low Achievement
- 3. Apply the Exclusions

(Demonstrate that the difficulty is a disability and that special education is the best intervention)

- www.air.org/ldsummit

1. Assessing Response to Instruction

- Universal screening of all students for reading (and behavior) problems
- Monitor progress of at-risk students: establish a surveillance system
- Introduce multi- tiered intervention programs that begin in the classroom
- Evaluate the fidelity (and quality) of different instructional programs (fidelity- done in any significant research study; should be at least 80%)
- Increase intensity for those who show inadequate response

Criteria for Inadequate Response

- Can be norm- referenced or criterion-referenced benchmark
- Benchmarks can be “national” or local
- End point, slope, or both?
- Key for intervention is to account for change- treatment response gets confused with identification
- May be resource driven
- Operates to move students through tiers and as a data source for identification

2. Establish Low Achievement: IDEA 2004 Domains of SLD

- (1) The child does not achieve commensurate with the child's age in one or more of the following areas, when provided with learning experiences appropriate for the child's age:
- (i) Oral expression.
- (ii) Listening comprehension.
- (iii) Written expression.
- (iv) Basic reading skill.
- (v) Reading fluency skills.
- (vi) Reading comprehension.
- (vii) Mathematics calculation.
- (viii) Mathematics problem solving.

Achievement Constructs (Depend on the Child)

Word Recognition: Basic Reading

- Real Words
- Pseudowords

Reading Comprehension

Reading Fluency

Math Computations/Problem Solving

Written Expression: Spelling Dictation, Handwriting, Composition

Remember the issues with Low Achievement models: Necessary, but not sufficient and cannot be sole criterion

3. Exclusions: Evaluate Contextual Factors and Related Disorders

- General principle: assess in the same way that the factors and conditions would be assessed in the absence of concerns about LDs
- Assessments depend on the question
- Routine use of behavior rating scales (home and school)
- Consider oral language and limited English proficiency

Issues with RTI

- Key issue is enhancing instruction- in some domains, it's a scaling problem
- Linking general and special education
- Resources must be redeployed
- Need more research on core instruction in math and written expression and tier 2/3 in math
- Knowledge base on inadequate responders is weak
- Identifying inadequate responders- still a continuum with potential cut point issues

Research is Evolving!!

Identification Issues

- Progress monitoring assessments not adequate as sole criterion for identifying SLD
- Not clear what assessments of growth add to end point assessments for identification (intervention is a different issue)
- Different assessments and models identify different students as SLD (so what's new? Rigid cut points inherently unreliable in identifying individual students)
- Need multiple criteria
- Improve instruction and these issues will not be difficult

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Who is LD?

- The student who does not respond to quality instruction: hard to teach, not unable to learn
- Low achievement and inadequate instructional response
- Often preventable with early intervention
- Heritable, but neural systems are malleable

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Questions?

Thank you!

- Evaluation
- Online Q&A for two weeks
- www.texasldcenter.org/qanda/identification.asp