

Texas Center *for* Learning Disabilities

Measuring Responsiveness: Universal Screening & Progress Monitoring

Presented by Amy E. Barth, Ph.D.

Texas Center for Learning Disabilities

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Welcome!

- Texas Center for Learning Disabilities Podcast Series
 - #1: TCLD Website Tour
 - #2: Identifying Students with Specific Learning Disabilities in a Response to Intervention Model
 - #3: Implementing Tier 2 and Tier 3 Reading Interventions: What Can Research Tell Us?
 - #4: Teaching Older Students with Reading Difficulties and Disabilities: How Do We Do RTI?
 - #5: Measuring Responsiveness: Universal Screening and Progress Monitoring
 - More to come covering other TCLD research topics!



Texas Center for Learning Disabilities

Located across three organizations

- University of Houston
- The University of Texas at Austin
- The University of Texas Health 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 <u>www.texasldcenter.org</u>



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Response to Intervention (RTI)

- RTI is an alternative framework for underachievement
 - Unexpected failure to benefit from validated, high quality instruction
- RTI eliminates poor instructional quality as a reason for learning difficulties



Advantages of RTI

- Students are provided intervention early
 - RTI does not wait for students to fail before providing more intense or specialized instruction
- Student assessment data is used to inform instructional decision making.





Tier 3: Special Education/Gifted Education (few students)

Tier 2: Student Assistance Team (SAT) process (some students)

Tier 1: Universal Screening, Appropriate Core Instruction with Universal Interventions (all students)















Recommendation 1.

- Screen all students for potential learning problems at BOY and MOY
- Regularly monitor the progress of students who are at elevated risk for developing learning disabilities

Gersten, R., Compton, D., Connor, C. M., Dimino, J., Santoro, L., Linan-Thompson, S., & Tilly, W. D. (2008). Assisting students struggling with reading: Response to Intervention and multi-tier intervention for reading in the primary grades. A practice guide. (NCEE 209-4045). Washington, DC: National Center for Education Evaluation and Regional Assistance, Institute of Education Sciences, U.S. Department of Education. Retrieved form http://ies.ed.gov/ncee/wwc/publications/practiceguides/. 12



Universal Screening

 "Screening involves brief assessments that are valid, reliable, and evidencebased. They are conducted with all students or targeted groups of students to identify students who are at risk of academic failure and, therefore, likely to need additional or alternative forms of instruction to supplement the conventional general education approach."

National Research Center on Response to Instruction

http://www.rti4success.org



NM Universal Screening

A variety of assessments that are administered to all students in the first weeks of school, and then again three to four other times during the school year as a way identify students at risk and/or to adjust instruction. Sometimes universal screening is called benchmarking as it is meant to measure adequate student progress towards gradelevel proficiency of state standards. The yearly standards-based assessment is also considered universal screening.



Universal Screening

- Screening tests have historically been used in the health related professions
- Used to identify future health risks in individuals who appear healthy
- If the individual fails the screening test, follow up evaluation is initiated and if required, interventions are prescribed



Health Screening Example

- High blood pressure (HBP) can lead to heart attacks or strokes
- Each annual exam screens patients for HBP
 - Benchmark = below 140/90
- If screening suggests HBP then the patient is monitored over a 6-8 week period to confirm patient's risk status for HBP
- IF HBP is confirmed then treatment is outlined
 - Lifestyle
 - Medications: inexpensive diuretics
- For patients who fail to respond to treatment, tertiary prevention occurs
 - Lifestyle
 - Medications: ACE inhibitors, beta blockers



Universal Screening in Schools

- The first step is to screen all students
- Goal: To identify students at-risk for academic and behavioral difficulties



How do I carry out schoolwide universal screening?

 "Create a building-level team to facilitate the implementation of universal screening and progress monitoring" (p.12).



Building-level Team Members

Principal

- Assistant Principal
- School Psychologist
- Special Education Representatives
- General Education Representatives



Focus of Building-level Team Logistics of implementing school-wide screening and subsequent progress monitoring

- What assessments will be administered?
- Who will administer the assessments?
- Who will conduct the assessment training and ensure fidelity of implementation?
- How will the data be managed?
- Who will interpret the data?
- Who will oversee the scheduling and implementation of BOY and MOY assessments?



Focus of Building-level Team

- Establish guidelines the school will follow when students do not respond to Tier 1 instruction
- Establish guidelines the school will follow when students do not respond to Tier 2 intervention and do respond to Tier 2 intervention
- Establish guidelines the school will follow when students do not respond to Tier 3 intervention and do respond to Tier 3 intervention



Focus of Building-level Team

- http://www.ed.gov/about/offices/list/osers/ osep/
- <u>http://www.rti4sucess.org/</u>
- http://www.studentprogress.org/



How do I carry out school wide universal screening?

 "Create a building-level team to facilitate the implementation of universal screening and progress monitoring" (p.12).

2. "Select a set of efficient screening measures that identify children at risk for poor academic outcomes with reasonable accuracy" (p.12).



1. SCREEN ALL STUDENTS FOR POTENTIAL READING PROBLEMS

Table 3. Recommended target areas for early screening and progress monitoring

Measures	Recommended grade levels	Proficiencies assessed	Purpose	Limitations
Letter naming fluency	K-1	Letter name identification and the ability to rapidly retrieve abstract	Screening	This measure is poor for progress monitoring since students begin to learn to associate letters with sounds. It is not valid for English
		information		learners in kindergarten, but seems valid for grade 1.
Phoneme Segmentation	K-1	Phonemic awareness	Screening and progress monitoring	This measure is problematic for measuring progress in the second semester of grade 1. As students learn to read, they seem to focus less on phonemic skills and more on decoding strategies.
Nonsense word fluency	1	Proficiency and automaticity with basic phonics rule	Screening and progress monitoring	This measure is limited to only very simple words and does not tap the ability to read irregular words or multi- syllabic words.
Word identification ²⁶	1–2	Word reading	Screening and progress monitoring	This measure addresses many of the limitations of nonsense word fluency by including multisyllabic and irregular words.
Oral reading fluency (also called passage reading fluency)	1-2	Reading con- nected text accurately and fluently	Screening and progress monitoring	Although the measure has moderately strong criterion- related validity, it cannot give a full picture of students' reading proficiency. Many stu- dents will score close to zero at the beginning of grade 1. The measure still is a reason- able predictor of end of year reading performance.

Source: Authors' compilation based on Fuchs, Fuchs, Thompson, Al Otaiba, Yen, Yang, Braun, and O'Connor (2001b), Speece et al. (2003b); Schatschneider (2006); O'Connor and Jenkins (1999); and Baker and Baker (2008) for letter naming fluency. For phoneme segmentation, O'Connor and Jenkins (1999). For nonsense word fluency, Speece et al. (2003b); Good, Simmons, and Kame'enui (2001). For word identification, Fuchs, Fuchs, and Compton (2004); Compton et al. (2006). For oral reading fluency, Fuchs, Fuchs, Hosp, and Jenkins (2001a); Fuchs, Fuchs, and Maxwell (1988); Schatschneider (2006); Speece and Case (2001); Gersten, Dimino, and Jayanthi (2008); Baker, Gersten, Haager, and Dingle (2006).

26. Fuchs et al. (2004); Compton et al. (2006)

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Kindergarten

- Screening batteries should include measures that assess (p.14):
 - Letter Knowledge
 - Phonemic Awareness
 - Language



Grade 1

- BOY Screening batteries should include measures that assess (p.14):
 - Phonemic Awareness
 - Decoding
 - Word Identification
 - Text Reading



Grade 1

MOY Screening batteries should include (p.14):

- Decoding
- Word Identification
- Text Reading (accuracy and fluency)



Grade 2 and above

- Screening batteries should include measures that assess (p.14):
 - Word Reading
 - Passage Reading (accuracy, fluency, and comprehension)



Technical Characteristics to Consider

- 1. Time
- 2. Cost
- **3.** Reliability
- 4. Validity
- **5.** Classification Accuracy
- 6. Are the benchmarks meaningful



Reliability of the Screening Measure

- The extent to which the measurements of a test remain consistent
- Does the test measure achievement the same way each time it is used under the same conditions?
- Usually reported as internal consistency reliability or Cronbach's alpha and test-retest reliability
- Should be at least 0.70 or greater (Gersten et al, 2008)
- Reliability statistics are available in the publisher's technical manual, publisher's website, the National Center on Progress Monitoring and Response to Intervention



Validity of the Screening Measure

Predictive Validity: "an index of how well the measure provides accurate information on future reading performance of students"

(p. 14)

- Are scores on the screener highly correlated with scores on the end of year assessment (outcome)?
- Predictive validity should be equal to or greater than 0.60 (Gersten et al, 2008)



Classification Accuracy: The Ultimate Screen





Overlapping Distributions





Overlapping Distributions

TP 80	FP 20
FN 20	TN 80



Overlapping Distributions

TP 90
FN 10

 TP
 FP

 90
 30

 FN
 TN

 10
 70



Tier 1 – Primary Prevention: Universal Screening for Possible Reading Risk

Grade	PM Probe	Cut-Off
Kindergarten	Letter Sound Fluency	< 10 Letters/minute
Grade 1	Word Identification Fluency	< 15 words on list/minute
Grade 2	Passage Reading Fluency	< 15 words in text/minute
Grade 3	Passage Reading Fluency	< 50 words in text/minute
Grade 4	Maze Fluency	< 10 maze replacements/ 2.5 minutes
Grade 5	Maze Fluency	< 15 maze replacements/ 2.5 minutes
Grade 6	Maze Fluency	< 20 maze replacements/ 2.5 minutes



Tier 1 – Primary Prevention: Confirming Risk Status with PM

- Benchmark = Final Status Method:
 - Compares students' test scores to a criterion that may represent a norm referenced score or a criterion-referenced benchmark
- Growth = Slope-Discrepancy Method:
 - Compares students' learning rates (slopes) to the average rate of learning for a reference group (same grade peers from a class, district, state, or nation)
- Combo = Dual-Discrepancy Method:
 - Compares both students' rate or growth and level of achievement to the reference group

See Barth, et al (2008)



Tier 1 – Primary Prevention: Confirming Risk Status with PM

Grade	Inadequate Reading Slope	
Kindergarten	< 1 (LSF)	
Grade 1	< 1.8 (WIF)	
Grade 2	< 1 (PRF)	
Grade 3	< 0.75 (PRF)	
Grade 4	< 0.25 (Maze)	
Grade 5	< 0.25 (Maze)	
Grade 6	< 0.25 (Maze)	



 Roadblock 1.1: "It is too hard to establish district-specific benchmarks" (p. 15)

National benchmarks



- Roadblock 1.2: "Universal screening falsely identifies too many students" (p. 15).
 - Adjust the cut-point



- Roadblock 1.3: "Some students might get "stuck" in a particular tier" (p. 15).
 - If teachers are using data to modify the type and intensity of intervention, growth for some students will be slower
 - Tiers are not standardized, one size fits all interventions with lock-step groupings of students



- Roadblock 1.4: "Some teachers place students in tutoring when they are only one point below benchmark" (p. 16).
 - No screener or progress monitoring measure perfectly classifies students
 - No screener or progress monitoring measure is perfectly reliable and valid
 - Utilize a confidence interval for each benchmark score







Recommendation 4.

 Monitor the progress of students receiving Tier 2 or Tier 3 intervention at least once a month.



Progress Monitoring

 Progress monitoring is a practice used to assess a students' response to additional support at more frequent intervals between universal screenings.



Recommendation 4.

- The data should be used to determine whether students require increasingly intense intervention.
- For students who do not make sufficient progress, school-wide teams should design a Tier 3 intervention plan.

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How to carry out regular progress monitoring

- "Monitor progress of Tier 2 students on a regular basis using grade-appropriate measures" (p. 24).
 - PM represents one way to assess students' retention of material taught and their path to skill proficiency
 - Monitor progress at least 8 times during the school year, but can be done more frequently.
 - Use measures that are efficient, reliable, and valid



Table 5. Progress monitoring measures in grades K-2

GRADE	Measure
Kindergarten	Phonemic Awareness
Grade 1	Fluency Word Recognition Nonword (Psuedo Word) Reading Oral Reading Fluency (Connected Text)
Grade 2	Fluent Word Recognition Oral Reading Fluency

Source. Author's compilation based on information described in text. See page 25.



http://www.studentprogress.org/chart/chart.asp 49



How to carry out regular progress monitoring

 "Monitor progress of Tier 2 students on a regular basis using gradeappropriate measures" (p.24).

2. "While providing Tier 2 instruction, use progress monitoring data to identify students needing additional instruction" (p.25).



Description: Inadequate response to quality instruction.

This student has responded poorly to the intervention strategy. After an initial adaptation period of five days, the teacher implemented the strategy as designed for the duration of the intervention period. In spite of this assistance, the student's rate of learning throughout the period has been slow. This response-to-instruction pattern indicates that the student's lack of progress is more likely the result of learning difficulties than a lack of effective instruction. Specially designed instruction is likely needed for this student to acquire and retain new information (courtesy Joe Kovaleski)



Description: Student responds well to quality instruction.

This student responded well to the intervention strategy. After an initial adaptation period of six days, the teacher implemented the strategy as designed for the duration of the intervention period. With this assistance, the student's rate of learning throughout the period was steady and in a positive direction. This response-to-instruction pattern indicates that the student's difficulties are more likely the result of a lack of effective instruction than a disability. This student does not display a high degree of need for special education because he can demonstrate acquisition and retention with adapted instruction in the regular classroom (courtesy Joe Kovaleski).



Description: Response to instruction cannot be determined.

This student has responded poorly during the intervention strategy. However, in spite of support, the intervention was not implemented as planned throughout the intervention period. Consequently, it cannot be determined whether the student's lack of progress are more likely the result of learning difficulties or a lack of effective instruction. Another period of support is needed to assist the teacher to implement the strategy as designed in order to make a conclusion about this issue (courtesy Joe Kovaleski).



How to carry out regular progress monitoring

- "Monitor progress of Tier 2 students on a regular basis using grade-appropriate measures" (p.24).
- 2. "While providing Tier 2 instruction, use progress monitoring data to identify students needing additional instruction" (p.25).

3. "Consider using progress monitoring data to regroup Tier 2 students approximately every six weeks" (p. 25).



 Roadblock 4.1: "Students within classes are at very different levels for Tier 2 intervention" (p. 25).

Consider grouping students across classes



- Roadblock 4.2: "There is insufficient time for teachers to implement progress monitoring" (p. 25).
 - Consider using paraprofessionals, parents, volunteers, or other school staff



More information

- www.nasdse.org
- www.centeroninstruction.org
- www.rtinetwork.org
- www.iris.peabody.vanderbilt.edu
- www4.scoe.net/rti/programs.cfm
- www.rti4success.org/
- www.rtinetwork.org
- www.ped.state.nm.us./RTI.html



Gersten, R., Baker, S.K., Shanahan, T., Linan-Thompson, S., Collins, P., & Scarcella, R. (2007). Effective Literacy and English Language Instruction for English Learners in the Elementary Grades: A Practice Guide (NCEE 2007-4011). Washington, DC: National Center for Education Evaluation and Regional Assistance, Institute of Education Sciences, U.S. Department of Education. Retrieved from http://ies.ed.gov/ncee/wwc/ publications/practiceguides



Thank you!

Evaluation

Online Q&A for two weeks

https://surveystation.austin.utexas.edu// TakeSurvey.aspx?SurveyID=76M149l1