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**COMMENTARY** 

## Four Steps to Implement RTI Correctly

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With the 2001 passage of the No Child Left Behind Act, the national education agenda shifted from a focus on process and access to a focus on results. In this new education climate, Response to Intervention, or RTI, spread like the latest diet fad because it offered schools a way to get better results for students.

RTI refers to a collection of practices that involve identifying academic risk, intervening prior to full-blown academic failure with increasingly intensive interventions, and monitoring student growth. RTI is designed to remove the oh-so-human temptation to speculate and slowly mull over learning problems, and instead spur teachers into action to improve learning, see if the actions worked, and make adjustments in a continuous loop.

Guided by assessment data, children progress through a series of instructional tiers experiencing increasingly intensive instruction as needed. We—a group of education leaders and researchers—have heard it said, "Being against RTI is like being against motherhood." After all, who does not want children to grow?

However, knowing what works and doing what works are two different endeavors. It is difficult for people to successfully follow diets, stick to budgets, and, yes, to implement RTI. The key challenge, we believe, is getting the already-busy people in schools to implement RTI like an effective weight-loss plan, with a commitment to attaining long-term improvements for all students.

What are the actions that count in RTI? Here are four common implementation pearls for schools that want to attain better results with RTI:

First, it is time for smarter screening. Schools are in an overtesting reality. Time spent on assessments is costly both in resources and lost instructional time. We routinely work with school systems that allocate 25 percent or more of their time to assessment. Because most schools are not clear about how they will use the assessment information—or what their actual decisionmaking needs are, for that matter—schools often hedge their bets and opt to collect more data. Most administrators have heard how powerful assessment can be, so they feel confident that more assessment is not harmful, even if it does not seem incredibly helpful. This type of blind screening does more harm than good. Year-end test scores can be used to indicate program health, and one or two single universal screenings can be used to reflect midstream performance. Use of planned instructional trials between assessment occasions, or "gated screening," improves the accuracy and efficiency of screening decisions to pinpoint the small group of students who really need stepped-up interventions—Tier 2 or Tier 3, in RTI parlance—when core instruction is working well.

In jargon-free terms, schools should administer only one low-cost screening tool to rule out or address a systemic, core-instruction problem first. They should conduct a series of brief follow-up assessments, with only the small group of students who appear to be at risk on either the first screening or the year-end test from the preceding year. Schools can minimize screening costs by selecting efficient measures and administering them well.

These assessments, however, cannot be allowed to interfere with teaching. Assessments are powerful, but there is a point of diminishing returns. We believe that most schools are in this zone of diminished returns because they are not assessing strategically.

## "Assessments are powerful, but there is a point of diminishing returns."

**Second, the focus of effective RTI implementation must be core instruction.** Core instruction is where the teacher, student, and content meet every day for roughly 32 weeks. Every teacher should be supported to know exactly what students are expected to learn within their grade level, to map a calendar of instruction onto that timeline using resources beyond the textbook, and to assess student mastery of skills.

When core instruction is strong, a majority of students perform in the "not-at-risk" range on screening. When there is a systemwide problem, it is foolish to try to provide interventions to all of those children as a first step in RTI. When many children score in the "risk" range on a screening, it is not possible to figure out who truly needs help. As a result, a teacher will likely end up providing intervention to the wrong students, if he or she works only with a select group.

The process of trying to provide intervention to more than 20 percent of students rapidly overwhelms the system's resources. When large numbers of children are at risk, the first step should be core-instruction improvements and effectively delivered classwide intervention.

Classwide intervention is a high-yield and easy-to-deploy intervention tactic that, while not new, is not as widely used as it could be. One experimental study found that for every seven children who received classwide mathematics intervention, one child was prevented from failing the year-end state test in mathematics. Improvements to core instruction require serious teamwork, trust, and a paradigm shift in schools in which teachers may be accustomed to working in isolation. These teachers may even fear a loss of autonomy or vulnerability in doing the work required to upgrade their coreinstructional program.

**Third, schools need effective intervention systems that match student need.** Many schools struggle to implement effective supplemental interventions. At the surface level, targeting reading fluency, comprehension, vocabulary, phonics, and phonemic awareness for the weakest students sounds great. But intervening without consideration for what a student specifically needs is like choosing an antibiotic without identifying the bacteria causing an infection.

For some children, the intervention will appear to work because they would have done fine without intervention. For some children, the intervention will work because it happened by chance to be a good match. And for others, the intervention just won't work.

In most schools, Tier 2 or 3 intervention is a prescription that lasts about 20 weeks, in which all students get the same thing, whether they need it or not. It is time to align Tier 2 and Tier 3 practices with student learning needs and require adults to be more responsive to whether these tactics actually improve learning.

Fourth, intervention intensity is not the same as "longer and louder." The ways in which RTI has tried to operationalize intervention intensity are out of sync with the best available evidence on what makes for more intensive instruction. Schools can improve implementation by considering research evidence to select instructional actions that produce strong returns on student learning. Such tools include aligning intervention strategy with student proficiency, increasing the number of learning trials within an intervention session, providing more frequent and precise feedback to students, and adjusting intervention tactics between sessions based on student growth (or lack thereof).

Research has shown that RTI practices can work to improve student outcomes. Yet, the most pernicious threat to RTI—and the Achilles' heel of all promising practices in education—is poor implementation. Implementers can work smarter by investing in coreinstructional support with renewed vigor, implementing classwide intervention supplements, paring down screening while using the data more effectively, and changing the way they operationalize intensity.

If the number of students attaining proficiency does not grow across screenings and years, then RTI is not working for your school and should be adjusted. Knowing how to adjust is pretty clear, but getting people to do the work with you is the hard part.