

## **Response to Intervention Procedures**

### **Lincoln County School District #2**

#### **I. Definitions**

- A. **At-Risk Students:** At-risk students are students whose initial performance level or characteristics predict poor learning outcomes unless intervention occurs to accelerate knowledge, skill, or ability development.
- B. **Core Curriculum:** The core curriculum is the course of study deemed critical and usually made mandatory for all students of a school or school system. Core curricula are often instituted at the elementary and secondary levels by local school boards, Departments of Education, or other administrative agencies charged with overseeing education. As mandated by No Child Left Behind, core curricula must represent scientifically-based practice, which means the application of rigorous, systematic, and objective procedures to obtain reliable and valid knowledge relevant to education activities and programs.
- C. **Criterion-Referenced Assessment:** Criterion-referenced assessment measures what a student understands, knows, or can accomplish in relation to a specific performance objective. It is typically used to identify a student's specific strengths and weaknesses in relation to an age or grade level standard. It does not compare students to other students.
- D. **Curriculum Based Assessment (CBA):** CBA is a broader term than Curriculum-Based Measurement (CBM), as defined by Tucker (1987). CBM meets the three CBA requirements: (1) measurement materials are aligned with the school's curriculum; (2) measurement occurs frequently; and (3) assessment information is used to formulate instructional decisions.
- E. **Curriculum-Based Measurement (CBM):** CBM is an approach to measurement that is used to screen students or to monitor student progress in mathematics, reading, writing, and spelling. With CBM, teachers and schools can assess individual responsiveness to instruction. When a student proves unresponsive to the instructional program, CBM signals the teacher/school to revise that program. CBM is a distinctive form of CBA because of two additional properties: (1) Each CBM test is an alternate form of equivalent difficulty; and (2) CBM is standardized, with its reliability and validity well documented.
- F. **Data Driven Decision Making:** Data driven decision making is the process of basing instructional, educational, or evaluative decision making through ongoing progress monitoring and analysis of collected data.
- G. **Interventions:** Interventions are designed to help student(s) improve performance relative to specific, realistic and measurable goals. Interventions are based on data collected on current student(s) performance, and may include modifications and accommodations. Interventions are multi-tiered, research based, prescriptive, time limited, and parent inclusive. Intensive academic and/or behavioral interventions are characterized by their increased focus for students who fail to respond to less intensive forms of instruction. Intensity can be increased through many dimensions including length, frequency, and duration of implementation. Within RTI, intensive is sometimes referred to as tertiary intervention.

- H. Multi-Tiered Intervention Model: The multi-tiered intervention model provides different levels of intensity (universal, strategic, intensive) based upon student response to intervention, with ongoing progress monitoring.
- I. Problem Solving Process: The problem solving process is an interdisciplinary, collaborative team process which is based on a multi-tiered model and includes data driven decision making, parent-school partnerships, progress monitoring, focused assessment, flexible service delivery, and prescriptive, research based interventions.
- J. Problem Solving Team: A problem-solving team, or at risk committee, is a collaborative team of general and special education staff members, including parents, which implements the problem solving process for students at risk for school underachievement.
- K. Progress Monitoring: Progress monitoring is brief, frequent, ongoing assessment that provides objective data to determine if students are responding well to an intervention.
- L. Response to Intervention (RTI): Response to intervention integrates assessment and intervention within a multi-level prevention system to maximize student achievement and reduce behavior problems. With RTI, schools identify students at risk for poor learning outcomes, monitor student progress, provide evidence-based interventions and adjust the intensity and nature of those interventions depending on a student's responsiveness, and identify students with learning disabilities.
- M. Screening or Universal Screening: Universal screening is conducted, usually as a first stage within a screening process, to identify or predict students who may be at risk for poor learning outcomes. Universal screening tests are typically brief; conducted with all students at a grade level; and followed by additional testing or short-term progress monitoring to corroborate students' risk status. Universal screening is an easy to administer school-wide assessment consisting of probes that are aligned to the curriculum and state academic standards.
- N. Standard Protocol Interventions: Standard protocol intervention relies on the same, empirically validated intervention for all students with similar academic or behavioral needs. Standard protocol interventions facilitate quality control.
- O. Tiered Instruction: Tiered instruction describes levels of instructional intensity within a multi-tiered prevention system.
  - 1. Tier 1 Intervention: Tier 1 Interventions are universal interventions provided to all students in the classroom, regardless of individual needs. These may be research based, but are not prescriptive.
  - 2. Tier 2 Intervention: Tier 2 Interventions are strategic, targeted interventions to be implemented when progress monitoring or assessment data indicates that a student is not making adequate gains from universal instruction. Tier 2 Interventions are smaller group interventions designed to meet the specific needs of a student and peers with similar needs.
  - 3. Tier 3 Intervention: Tier 3 Interventions are intensive, highly individualized, systematic and explicit instruction in an area of assessed need.

## II. Introduction

IDEA 2004 and its 2006 regulations allow states to permit the use of an eligibility process based on a student's response to "scientific research-based intervention" 34 CFR §300.307(a)(2). This process is commonly referred to as the Response to Intervention (RtI) process. RtI is a comprehensive multi-tiered system that is designed to provide research-based instruction to all children.

*Guidelines for developing an intervention that may be considered to be "scientific, research based" can be found in the No Child Left Behind (NCLB) Act, which uses scientifically based research as one of its educational cornerstones. The term itself is defined at 20 USC 7801 (37), and repeated in the 2006 IDEA regulations at 34 CFR §300.35, to mean research that involves the application of rigorous, systematic, and objective procedures to obtain reliable and valid knowledge relevant to education activities and programs.*

In an RtI framework, most children receive general whole-class instruction in the first tier. Some children receive more intense small-group instruction in the second tier and few children receive very intensive individualized instruction in the third tier. Although RtI is a part of the general instructional program, particular components and processes must be implemented before data can be used as a basis for determining whether a child is a child with a learning disability. The purpose of this document is to ensure that RtI processes throughout the district align with State rules, policies and procedures, thus providing every child in need access to a comparable, valid, reliable, and comprehensive evaluation for special education.

In Lincoln County School District #2, all students are assessed in the areas of reading, writing, and mathematics at least twice annually. Students who score one or more standard deviations below the mean in one or more areas are considered for prescribed intervention and progress monitoring through a multi-tiered RtI process. When a student does not make sufficient growth in a particular tier (with appropriate problem solving and intervention changes), the student is moved to the next tier where the intensity of instruction and assessment increases. Ultimately, unexplained underachievement and insufficient growth (i.e., lack of progress) can lead to a determination of eligibility for special education services under the SLD category.

"Specific learning disability" means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. A specific learning disability does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of cognitive disabilities, of emotional disturbance, or of environmental, cultural or economic disadvantage. [Chapter 7, Part 4, Section 10(4)]

RtI models have the capacity to increase accuracy in eligibility determination while improving outcomes for and providing support to all students who are not achieving at expected levels. Successfully implemented RtI models require substantial cooperation between regular and special education. They also require that procedures be used within general education to impact the general education curriculum and teacher practices. Widespread progress monitoring of all students, collegial problem-solving and systematic intervening within general education are highly beneficial for all students.

Using data from a process of response to scientifically-based intervention is substantive, but not sufficient for making a determination of SLD. The OSEP commentary clearly indicates that a response to scientific, research-based intervention, commonly referred to as response to intervention (RtI) cannot be the only determinant of whether a child meets SLD eligibility. "RtI is only one component of the process to identify children in need of special education and related services. Determining why a child has not responded to researched-based interventions requires a comprehensive evaluation. The results of an RtI process may be one component of the information reviewed as part of the evaluation. A child's eligibility for special education services cannot be changed solely on the basis of data from an RtI process" (71 FR 46647-46648).

It is important to note that the comprehensive evaluation could include formal, standardized assessment tools, including measures of cognitive ability, in part or in whole. However, the decision of **which evaluation components are needed must be determined on a child by child basis** rather than on an assumption that each child will need a full battery of traditionally used assessments.

### III. Components and Procedures for RtI

All schools in Lincoln County School District #2 serving students in grades Kindergarten through 6<sup>th</sup> grade must establish and maintain an RtI process meeting the provisions outlined in this section. Secondary schools must meet these same provisions before using RtI as a means of determining whether a child is a child with a disability.

- A. Problem solving processes and problem solving teams:
  - 1. Each school must establish a problem solving team who's function is to:
    - a. Review performance data of students who are referred for intervention.
    - b. Ensure that all students are screened at least twice annually in the areas of reading, writing, and mathematics.
    - c. Ensure that students receiving tier II and tier III interventions are assessed according to an appropriate schedule relative to their prescribed level of intensity.
    - d. Analyze student performance data and make assumptions about individual student growth based on comparative and trend data.
    - e. When appropriate, prescribe interventions and/or changes in interventions based on student performance data.
    - f. When appropriate, refer students for special services (504 or SPED).
    - g. Other as determined by the building principal.

2. Composition of the Problem Solving Team:
  - a. Chair (can be the building principal or a designee)
  - b. General Education Teacher (standing member)
  - c. School Psychologist or other professional trained and/or qualified to analyze data and interpret assessment results.
  - d. Special Education Teacher
  - e. Add Hoc (invited when appropriate/necessary)
    - i. Teacher of a particular child
    - ii. Parent of a particular child
    - iii. Title One teacher or paraprofessional
    - iv. SPED related service provider (i.e. Speech only student)
3. Frequency of Meetings:
  - a. The Problem Solving Team must meet to review progress monitoring data and engage in the problem solving process as frequently as necessary to meet the provisions contained in these procedures. Frequency of meetings can be determined and adjusted at the discretion of the building principal.

B. Assessment and Data Based Decision Making:

1. All students shall be screened in the areas of reading, writing, and mathematics at least twice annually.
  - a. Data from general screenings shall be reviewed and those students who score 1 standard deviation below the mean (at or below the 15<sup>th</sup> %tile) and fail to reach district established grade-level curricular benchmarks in one or more areas shall be considered for intervention.
  - b. Schools may use standardized measures or they may use teacher-developed curriculum-based common assessments. Teacher-developed curriculum-based common assessments should be used uniformly in grade-levels across the district. When using these assessments, a district committee will establish cut scores and/or benchmarks that indicate an expected performance level appropriate for each respective grade level. Scores within each building are analyzed and students who fail to meet grade-level benchmarks and score at or below the 15% tile are considered for Tier II intervention.
2. Students who receive tier II intervention shall be assessed using a progress monitoring system where assessments are administered at least twice-monthly.
  - a. Data is analyzed at least monthly by the Problem Solving Team and instructional adjustments and/or intervention changes are considered when a student fails to make adequate academic growth over a four-week period (over two consecutive data points).
    - i. Adequate academic growth is determined by comparing the targeted child's performance data to that of the norm group. The norm group's mean growth data is charted to establish a trend line. The targeted child's data is charted and the slope of the trend data of the targeted child is compared to the slope of the trend data of the norm group. Adequate growth is achieved when the targeted child's growth exceeds that of the norm group.

The school may determine whether to use National, State, or Local norm data when making this comparison.

3. Students who receive tier III intervention shall be assessed using a progress monitoring system where assessments are administered at least weekly.
  - a. Data is analyzed at least twice-monthly by the Problem Solving Team and instructional adjustments and/or intervention changes are considered when a student fails to make adequate academic growth, as defined in section III.B.2a.i., over a two-week period (over two consecutive data points).
4. Parent notification, participation, and consent:
  - a. Schools must make a concerted effort to involve parents as early as possible, beginning with instruction in the core curriculum. This can be done through traditional methods such as parent-teacher conferences. As a child progresses through the RTI tiers, parents should be informed of intervention changes and assessment results. **Parents must participate in the problem-solving process before a child's RTI data can be used to determine eligibility for special education services.**
  - b. Because RTI is a method of delivering the general education curriculum for all students, written consent is not required before administering universal screenings, curriculum-based measurements, and progress monitoring assessments when these tools are used to determine instructional need. However, **when a student fails to respond to interventions and the decision is made to evaluate a student for special education eligibility, written consent must be obtained in compliance with 34 CFR §300.300 and Wyoming Rules, Part 1, Section 3.**
5. Each school must implement and sustain a 3 tier system for assessment and instruction/intervention including:
  - a. **Tier 1:** Universal Interventions. State content standards-aligned core instruction and school-wide positive behavior interventions and supports are provided to all students in the general education core curriculum. Interventions include:
    - i. High quality, effective instruction designed to engage and challenge students;
    - ii. Clear and high expectations for student learning and behavior;
    - iii. Effective support to enhance student engagement in the learning process and to promote school completion; and
    - iv. Periodic progress monitoring (at least twice per school year in reading, writing, and mathematics).
  - b. **Tier 2:** Strategic Interventions. Academic and behavioral strategies, methodologies and practices designed for students who are not making expected progress in the state content standards-aligned instructional system who are at risk for educational underachievement. Students who score one or more standard deviations below the mean on progress monitoring assessments are considered for strategic interventions. Strategic interventions include:
    - i. State content standards-aligned instruction with supplemental, small group instruction;

- ii. Use of standard protocol interventions; and
- iii. Minimum of twice-monthly progress monitoring.
- c. **Tier 3:** Intensive Interventions. Academic and behavioral strategies, methodologies, and practices designed for students who are significantly below established grade-level benchmarks in the state content standards-aligned instruction. Intensive interventions are:
  - i. Determined and selected through an individual problem solving process;
  - ii. Explicit and skill specific;
  - iii. Individualized or provided in small group (3 to 5 students) instruction;
  - iv. Increased by frequency of intervention sessions and minutes per session; and
  - v. Progress monitored at least weekly.

#### **IV. Using RtI Data to Determine Eligibility for SPED**

- A. In order to be identified as a student with a Specific Learning Disability, the data collected during the Response to Intervention process must demonstrate the following:
  - 1. The child does not achieve adequately for the child's age or to meet state approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the child's age or state-approved grade-level standards:
    - a. Oral expression
    - b. Listening comprehension
    - c. Written expression
    - d. Basic reading skill
    - e. Reading fluency skills
    - f. Reading comprehension
    - g. Mathematics calculation
    - h. Mathematics problem solving; and
- B. The child does not make sufficient progress to meet age or state approved grade-level standards in one of the areas identified in paragraph A above when using a process based on the child's response to scientific, research-based intervention.

#### **V. Exclusions**

- A. In order to determine the existence of a Specific Learning Disability, the team must confirm:
  - 1. That the child's underachievement is not primarily the result of:
    - a. Cognitive impairment;
    - b. Emotional disability;
    - c. Cultural factors;
    - d. Environmental or economic disadvantage; or
    - e. Limited English proficiency.
  - 2. That the child's underachievement is not due to lack of appropriate instruction in reading or math as verified by:
    - a. Data that demonstrate that prior to, or as part of, the special education

- referral process, the child was provided appropriate instruction in regular education settings, delivered by highly qualified personnel; and
- b. Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction.

## **VI. Limitations**

- A. RTI is only one component of the process to identify children as eligible for special education.
- B. RTI does not replace the need for a comprehensive evaluation.
- C. A child's eligibility for special education services cannot be changed solely on the basis of data from an RTI process.

## **VII. Additional Guidance**

The purpose of this section is to provide supplemental guidance information that can be useful for training and implementation purposes. Although this information may be valuable in helping a school implement the preceding procedures, this section is purely guidance and shall not be construed as mandated procedure.

### Problem-Solving Process and Problem-Solving Teams

RtI is built on the use of a collaborative problem-solving process to identify instructional needs of students within a school. Schools may have an existing team, (e.g., Building Intervention Team or BIT, the At Risk Team, or other title) that is already using some of the problem-solving aspects. Schools can choose to change the function of an existing team or to disband previous teams and rename the team to demonstrate that the expectations for focusing on instructional interventions using progress monitoring data are more rigorous than has been true in the past. Regardless of how a school chooses to refer to the team, this team plays a critical role in the identification of SLD in that the determination of insufficient growth begins with the documentation from this team. For the purpose of this document, this team is referred to as the problem-solving team, even though schools may choose to use a different name for this team.

### When to Consider a Referral

When using the RtI process, a the problem-solving team meets regularly to review student progress monitoring data to ensure that students are progressing in the general education curriculum. The team tracks student progress and identifies recommendations for instructional interventions as needed. In tracking progress for students receiving Tier II or Tier III services, the problem-solving team will be responsible for considering whether or not a student should be referred for a comprehensive evaluation to determine if a student has a disability.

It is important to remember that the referral is generated through general education processes. The problem-solving team does NOT make a determination of eligibility, nor does this team conduct the comprehensive evaluation required for the eligibility determination. However, since the data collected by the problem-solving team is used as



part of the evaluation for determination of SLD, it is important that the problem-solving team has an awareness of the criteria that will be used to determine SLD. This awareness serves as a guide to the problem-solving team in making decisions about when to refer for SLD evaluation.

Generally, when using an RtI process as part of the SLD determination, consideration for a referral should be made only after:

1. A student has been provided with scientifically research-based intervention for a minimum of 16 weeks (80 school days).
  - a. Up to eight weeks (40 school days) of scientifically research-based intervention, during Tier 2, may count toward the required 16 weeks. Intervention during Tier 2 should occur daily for at least 20 minutes, or in accordance with the time specified by the research on the specific intervention.
  - b. At least eight weeks (40 school days) of intensive scientifically research-based intervention should be provided in Tier 3. Intensive scientifically research-based intervention should occur daily for at least 60 minutes during Tier 3.
  - c. There have been at least three intervention changes implemented and documented. At least one intervention change should occur after the child begins Tier 3.
  - d. In addition to changes in methodology, instructional material and programs, intervention changes can include changes in time, intensity or frequency while retaining other components of the intervention.
  - e. At least one change should be either a wholesale change in the instructional intervention or an additional intervention consisting of instructional material and instruction that supplements the existing intervention and is supported by research as a viable supplement.
2. Student participation in RtI interventions has been reasonably consecutive and consistent. It is suggested that a minimum attendance rate of 85% be established as a cut-off. It is further suggested that students who do not meet this requirement remain in RtI until their attendance rate meets or exceeds this standard.
3. Measures have been taken to modify the child's behavior and/or provide the child with incentives to increase the child's motivation to participate in prescribed interventions, when necessary. Behavioral interventions should consider environmental changes that may affect a child's behavior.
4. Interruptions in a child's participation in the prescribed intervention (e.g., vacation or long absence from school) have been taken into consideration. Regression and recoupment time must be considered when determining an appropriate extension of a prescribed intervention.
5. The student has received appropriate instruction. In determining appropriate instruction, the problem-solving team assures that:
  - a. Scientifically, research-based materials, approaches, and strategies are used (see definition).
  - b. Personnel are qualified and have received appropriate training in the use of the instructional materials or intervention.

- c. Interventions are delivered with fidelity (i.e., in the manner in which they were designed and researched).

In addition to the above procedures and guidelines, other requirements used to make SLD determination include the following:

1. Underachievement or lack of progress is not due to lack of appropriate instruction. 34 CFR §300.309(b) and the corresponding Chapter 7, Part 4, Section 10(d) specify that prior to determining eligibility for SLD, the evaluation team must determine that the child was provided appropriate instruction in the general education setting, delivered by qualified personnel. As the problem-solving team meets to review a child's progress, the team will want to review the instruction that the child has received thus far, including both the content and the personnel who provided the instruction. It is important that the problem-solving team can verify that instruction was provided by qualified personnel and that the instructional strategies were delivered with fidelity. Fidelity means that the instructional interventions recommended by the problem-solving team were implemented in the manner in which they were intended.
2. Parents were informed of assessments of achievement at reasonable intervals. The notification of assessments can include report cards, student progress reports, reports to parents of State and district-wide assessments, universal screening, progress monitoring or other formative or summative assessments
3. There is evidence of unexpected underachievement. One of the indicators of potential SLD is not achieving adequately for a child's age or to meet State-approved grade-level standards in one or more of eight qualifying areas, when provided with appropriate learning experiences and instruction appropriate for the child's age [§300.309(a)(1) and Chapter 7, Part 4, Section 10(c)(i)]. The lack of proficiency on the State assessment, by itself, is not sufficient to determine that a child has a SLD. However, failing the state assessment or not achieving at a rate that will lead to meeting the grade-level standards serves as a trigger or one factor to consider when deciding if a referral might be needed. The eight qualifying areas are: oral expression, listening comprehension, written expression, basic reading skills, reading fluency skills, reading comprehension, mathematics calculation or mathematics problem-solving.
4. Insufficient progress is well documented. The problem-solving team tracks the learning progress that is made when the child is provided scientifically-based instructional interventions. The team tracks the rate of growth (or slope) to determine if the child is achieving at a rate that will result in the child being able to reach the goal set for the child. If the team notes that the progress being made is flat or too slow, even after changing instructional intervention, the team must consider if the insufficient growth warrants a referral for further evaluation.
5. Lack of achievement or progress is not the result of other factors that could be addressed using available supports. Prior to determining if a child has a SLD, the evaluation team must ensure that the lack of achievement or progress is not due to a number of factors that might explain the underachievement. Many of these are factors the problem-solving team will consider when reviewing the progress monitoring data and making decisions about appropriate instructional interventions. The problem-solving team should consider the following:

- a. Can the child see, hear, and perform motor functions adequately to meet the learning expectations?
- b. Are there cultural, environmental, or economic factors that might be interfering with the child's learning?
- c. Is a language other than English spoken in the home and does the child have an adequate use of the English language to be successful in school?
- d. Are there medical issues that are interfering with the child's ability to learn?
- e. Is there a possibility that behavioral issues might be interfering with learning?
- f. Does the child understand and meet behavioral or social/emotional expectations?

If any of the above situations exist, the problem-solving team will want to consider providing the instructional supports that best address that situation. However, when all situations have been addressed or ruled out as a potential cause for the unexpected underachievement, the problem-solving team should consider a referral for further evaluation to better understand why underachievement exists and whether the student may be eligible for special education as a student with SLD.

- 6. When reviewing the child's academic progress, the problem-solving team must consider the following:
  - a. Is there sufficient progress to justify continuing the child with Tier 3 for a specified period of time?
    - i. When this option is chosen, the team must determine a timeline for continuation of the Tier 3 intervention and establish a date to reconvene the problem-solving team to monitor progress.
  - b. Is there sufficient progress to move the child back to Tier 2?
    - i. When this option is chosen, the appropriate Tier 2 intervention is identified and implemented.
  - c. Is there growth but the intensity of intervention needed to maintain the growth is greater than that provided at Tier 2 and a referral for further evaluation is warranted?
    - i. When this option is chosen, steps are taken to complete the referral for comprehensive evaluation process.
  - d. Is there insufficient growth that cannot be explained otherwise and a need to refer the child for a comprehensive special education evaluation?
    - i. When this option is chosen, steps are taken to complete the referral for comprehensive evaluation process.

### Referral for Comprehensive Evaluation

When making a decision to refer for a comprehensive evaluation, the problem-solving team might invite someone who is knowledgeable in the determination of eligibility for SLD to be

part of the decision-making process. The problem-solving team will consider a number of questions, in addition to the determination of insufficient growth.

1. *Is our information complete?* Teams will want to review all data collected to date to ensure it includes progress monitoring data, interventions that were used, assurances that interventions were used with fidelity, and any information obtained to rule out disqualifying factors that might explain underachievement.
2. *Does the student have very low skills?* It is important to compare the student with the expectations (i.e., grade level standards) of other students the same age or grade.
3. *Does the student evidence insufficient growth or non-response to intensive, research-based instruction?*
4. *Is there any conflicting data and, if so, can it be explained without further evaluation?*

It is important to remember that a referral can be made at any time significant underachievement is noted. In fact, a referral cannot be delayed just because a child has not completed all cycles of the RtI process. When a referral is found necessary before completion of the cycle, however, progress monitoring data should continue to be collected as part of the comprehensive initial evaluation process within the required 60 day timeline.

Additionally, a parental request for referral cannot be denied solely because the child has not completed the RtI process. However, when parents are informed of the process, receive regular progress reports and understand that the process is not meant to delay evaluation but is part of an effective instructional process; they are more likely to agree to allow the data from the RtI process be reviewed as part of a comprehensive evaluation.

When a decision to refer for a comprehensive evaluation is made, the problem-solving team or designated school personnel must:

1. Complete the referral form or process as outlined by the district procedures;
2. Follow the procedural safeguards for Prior Written Notice and Consent for Initial Evaluation;
3. Provide the parent with a copy of the Procedural Safeguards; and
4. Obtain written parental consent for evaluation.

During the referral and evaluation process, the child remains in the current intervention until the comprehensive evaluation is completed and the evaluation team convenes to determine eligibility for special education. Progress monitoring continues and data are included as part of the comprehensive evaluation.

### Comprehensive Evaluation

The comprehensive evaluation must be conducted in accordance with WY Chapter 7 Rules Governing Services for Children with Disabilities, Sections 4 and 5. The comprehensive evaluation must use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the child, including information provided by the parent. It is not permissible to use any single measure or assessment as the sole criterion for determining whether the child has a Specific Learning Disability.

The evaluation process must include:

1. Review of all existing data collected to date, including at least:
  - a. Results from classroom-based, district or State assessments;
  - b. Evaluations and information provided by the parents;
  - c. Data collected from the RtI process by the problem-solving team that verifies unexpected underachievement and insufficient growth;
  - d. A review of attendance and discipline referral data; and,
  - e. The results of the required observation.
2. The results of any individual assessments conducted and the educational implications.
3. Verification of achievement level using a norm-referenced assessment.
4. Summary of behavioral assessment to address or rule out behavioral issues.
5. Data demonstrating that the child was provided appropriate instruction in the general education setting that rules out these factors:
  - a. Lack of instruction in reading
  - b. Lack of instruction in math
  - c. Limited English proficiency

The data collected by the problem-solving team during the RtI process will provide useful instructional information as a component of the determination of SLD. However, it is likely that some additional information will be needed to help identify new or revised instructional strategies or find additional clues that help explain the underachievement and insufficient growth.

When all evaluation data have been collected, a group of qualified professionals and the parents meet to review the data and determine eligibility. The team must include at least:

1. The child's regular education teacher, or if the child does not have a regular education teacher, a regular classroom teacher qualified to teach a child at his or her age,
2. At least one person qualified to conduct individual diagnostic examinations of children, such as a school psychologist, speech-language pathologist, or remedial reading teacher, and
3. The child's parents.

Other individuals who are knowledgeable about the child or about disabilities may be included on the IEP team.

#### Determination of Specific Learning Disability Eligibility

Within 60 days of receipt of signed written parental consent, all evaluations must be completed. The team must meet to review existing data and determine if there is a need for any additional data; complete the evaluation report; and make an eligibility determination. The comprehensive evaluation must include information from multiple sources in determining SLD eligibility. Lack of progress in an RtI structure in and of itself is not sufficient to determine a child is eligible as a child with a disability in the area of SLD.

When making a determination of SLD, the evaluation team must consider all of the data and use the following to guide the decision:

1. The RtI component of the evaluation must evidence unexpected underachievement and insufficient growth. Evidence of underachievement and insufficient growth can be made when both of the following criteria exist:
  - a. A norm-referenced achievement test indicates that student achievement levels result in a score of 1.5 standard deviations below the mean; or the student's instructional performance level is two or more grade levels below his or her current grade placement determined by CBM scores, classroom performance, observation, and if appropriate, standardized assessments.
  - b. The student's rate of growth is insufficient to meet age or state approved grade-level standards and the student requires resources not available in the general education setting in order to make sufficient growth. Sufficient academic growth is determined by comparing the targeted child's performance data to that of the norm group. The norm group's mean growth data is charted to establish a trend line. The targeted child's data is charted and the slope of the trend data of the targeted child is compared to the slope of the trend data of the norm group. Sufficient growth is achieved when the targeted child's trend data exceeds the trend data from the norm group substantially enough to predict that the child will perform within the average range within a reasonable duration of time (not to exceed one calendar year).
2. The district must use at least eight (8) data points as a basis to establish rate of growth. At least four (4) of the last data points should represent student performance across one individual student protocol intervention.
3. The evaluation must assure through signature or other appropriate means from the district representative responsible for supervising the RtI component of the evaluation that core instructional programs and RtI interventions were implemented with fidelity.
4. The evaluation must rule out disqualifying conditions such as the effects of visual, hearing or motor disability, cognitive disability, emotional disability, cultural factors, environmental or economic disadvantage or limited English proficiency.

When making the SLD eligibility determinations, the evaluation team must ensure that required documentation specific to eligibility determination of SLD is part of the evaluation file. Required documentation must:

1. Indicate whether the child has a SLD.
2. Document the basis for the determination and assurance that the determination was made in accordance with Chapter 7 Rules.
3. Document the relevant behavior, if any noted, during the observations of the child and the relationship of that behavior to the child's academic functioning.
4. Document educationally relevant medical findings if any.
5. Document whether the child achieves adequately for the child's age or to meet State approved grade level standards.

6. Document the effects of a visual, hearing, or motor disability; cognitive disability; emotional disturbance; cultural factors, environmental or economic disadvantage; or limited English proficiency on the child's achievement level.
7. Document the instructional strategies used and the student-centered data collected.
8. Certify in writing by each evaluation team member that the report reflects the member's conclusions.

### Eligibility for Special Education Determination

Eligibility for special education is determined by responding to two questions:

1. Does the documentation meet the criteria and requirements in IDEA and the Wyoming Rules for eligibility as a child with a Specific Learning Disability?
2. Does the child need special education?

Each member of the team determining eligibility must certify their agreement with the Specific Learning Disability determination. A copy of this report must be provided to the parents.

When the evaluation team finds the child to be eligible for special education by responding to all of the above questions in the affirmative, the IEP team is convened and an IEP is developed. If the evaluation team finds the child is not eligible by responding to any of the questions in the negative, the child will continue to receive general education services through RtI or other general education systems that may be in place at the child's school.