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Erika L. Millhouse-Pettis
Loyola University Chicago

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LOYOLA UNIVERSITY CHICAGO

RESPONSE TO INTERVENTION: STAFF PERCEPTION OF THE
IMPLEMENTATION AND DEVELOPMENT OF A
THREE-TIER MODEL OF INTERVENTION

A DISSERTATION SUBMITTED TO
THE FACULTY OF THE GRADUATE SCHOOL OF EDUCATION
IN CANDIDACY FOR THE DEGREE OF
DOCTOR OF EDUCATION

PROGRAM IN CURRICULUM AND INSTRUCTION

BY

ERIKA L. MILLHOUSE-PETTIS

CHICAGO, ILLINOIS

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DEDICATION

This dissertation is dedicated to my parents and Aunt Clem. I thank each of you for believing in me and encouraging me not to give up. I appreciate all the love, patience, and understanding you provided me. Thank you.

TABLE OF CONTENTS

ACKNOWLEDGEMENTS	iii
LIST OF TABLES	viii
LIST OF FIGURES	ix
ABSTRACT	x
CHAPTER I: INTRODUCTION.....	1
Response to Intervention Framework in Illinois.....	6
Statement of the Problem.....	11
Purpose of the Study	13
Research Questions.....	15
Significance of the Study	15
Definition of Terms.....	16
CHAPTER II: REVIEW OF LITERATURE	18
Introduction.....	18
Historical Perspective of Response to Intervention	18
Rationale for Response to Intervention.....	21
Educational Policies, Laws, and Response to Intervention	24
No Child Left Behind Act.....	24
The President’s Commission on Excellence in Special Education Report.....	26
Individuals with Disabilities Education Act	26
Response to Intervention and the State of Illinois	28
Response to Intervention Models and Techniques	30
Problem Solving Model	33
Standard Protocol Model	35
Mixed Model.....	36
Response to Intervention Studies.....	37
The Minneapolis Public School System	38
The Heartland Educational Agency	39
The Pennsylvania Instructional Support Team	40
The Ohio Intervention-Based Assessments	40
Professional Development	41
Summary	43
CHAPTER III: RESEARCH METHODOLOGY	46
Introduction.....	46
Research Design.....	47
Research Participants	49
Research Instrumentation.....	51

Surveys.....	51
Interviews.....	52
Artifacts.....	53
Research Procedures	53
Surveys.....	53
Interviews.....	54
Artifacts.....	54
Data Analysis	55
Ethical and Validity Issues.....	57
Summary	57
CHAPTER IV: DATA ANALYSIS.....	59
Introduction.....	59
Research Questions.....	60
Data Collection	60
Interpretation of the Data	61
Understanding of Response to Intervention and the District’s Process	65
Staff’s Perception of the Type of Training Received	70
Personnel and Material Received to Support Response to Intervention...	72
Fidelity Within the Response to Intervention Implementation Process....	74
Staff Roles.....	77
Summary of Findings.....	79
Educator’s Perception of Response to Intervention.....	81
CHAPTER V: CONCLUSIONS AND RECOMMENDATIONS	83
Introduction.....	83
Overview of the Study	84
Limitations and Delimitations.....	85
Findings and Interpretations	86
Understanding of Response to Intervention and the District’s Process	86
Staff’s Perception of the Type of Training Received	87
Personnel and Material Received to Support Response to Intervention...	89
Fidelity Within the Response to Intervention Implementation Process....	90
Staff Roles.....	91
Recommendations for Future Research	92
Summary and Conclusions	93
APPENDIX A: INTERVIEW PROTOCOL FOR CERTIFIED STAFF	96
APPENDIX B: INTERVIEW PROTOCOL FOR BUILDING PRINCIPALS.....	99
APPENDIX C: INTERVIEW PROTOCOL FOR DISTRICT ADMINISTRATORS .	101
APPENDIX D: ARTIFACT REVIEW FORM	103

APPENDIX E: CERTIFIED STAFF SURVEY QUESTIONS.....	106
APPENDIX F: CONSENT TO PARTICIPATE IN INTERVIEW.....	109
APPENDIX G: SURVEY COVER SHEET	112
APPENDIX H: LETTER RECRUITING PARTICIPATION IN INTERVIEW PROCESS	115
APPENDIX I: LETTER OF INSTITUTIONAL COOPERATION.....	117
APPENDIX J: LETTER RECRUITING PARTICIPATION IN CERTIFIED STAFF SURVEY.....	119
REFERENCES	121
VITA.....	132

LIST OF TABLES

Table

1. District's Response to Intervention Process Criteria	50
2. Job Descriptions.....	62
3. Response to Intervention Trainings	64
4. Survey Responses	69

LIST OF FIGURES

Figure

1. Conceptual Framework for Response to Intervention	8
2. Problem Solving Method	10
3. Phenomenological Description	48

ABSTRACT

The purpose of this study was to analyze a school district's certified staffs' perception and training of its Response to Intervention model (RtI). RtI is a federally mandated initiative that requires school districts to provide high quality research based instruction, universal screenings, on-going progress monitoring, researched-based interventions, and reliable measures that are implemented with fidelity. Research suggests that successful RtI plans are impacted by professional development opportunities rendered to staff members, and the integrity in which the interventions are implemented (Fuchs & Fuchs, 2006). This study examined the structure, roles, resources, and trainings that impacted and aided in the implementation of RtI at a Chicagoland suburban school district.

A phenomenological qualitative case study methodology was used to investigate certified staff training and perception of its district's RtI model. Data was gathered and conclusions were drawn by reviewing artifacts, interviewing, and surveying certified staff members. Ten certified staff members were interviewed and 46% of the certified staff members elected to participate in the on-line survey. Interview and survey questions were designed to ascertain certified staffs' perception of the district's RtI process and professional development opportunities. The artifacts reviewed provided a descriptive perspective of the type and amount of professional development opportunities, board policies, and community resources available and implemented.

Results yielded indicated that certified staff had an understanding of the purpose and framework of RtI. Various trainings provided by the district facilitated a staff “buy-in” as well as assisted in establishing a framework that allows for continuous development within the RtI process. Data also suggested that as staff begins to implement RtI, their staffing needs changed. Their needs changed from how to implement the process to how to monitor student progress and collect data with fidelity and integrity.

Certified staff perceive RtI as an effective identification tool that when used effectively, identifies and provides appropriate supports to all students. Certified staff also believe that a staffs’ “buy-in” is greatly impacted by both district and building level administration. RtI was perceived to be implemented with fidelity and integrity when staff considered administration to be supportive and knowledgeable of its process.

CHAPTER I

INTRODUCTION

Early identification for students at-risk of having learning difficulties and the implementation of scientifically-based instructions and methods in the general education setting is a common link shared amongst educational policies and reports. At the forefront of these discussions in public education and mental health, is the science behind instruction and intervention (Hawkins et al., 2008). Special education organizations have joined together with the general educational community in conversations to develop and provide knowledge and technical support to help educators implement successful approaches to teaching all students (National Association of State Directors of Special Education, Incorporated & Council of Administrators of Special Education, 2006).

The Reauthorization of the Individuals with Disabilities Act in 2004 (Individual with Disabilities Education Improvement Act) and the No Child Left Behind Act of 2001 proposed that school districts across the nation reassess how students are identified as learning disabled and at-risk (Ardoin, Witt, Connell, & Koeing, 2005; Fuchs, & Fuchs, 2006; Shinn, 2006). Both laws stress the importance of providing high quality scientifically-based instructions and interventions, while holding schools accountable for the progress of all students in terms of meeting their appropriate grade level standards (Klotz & Canter, 2006). The No Child Left Behind Act of 2001 (NCLB) and the

Individuals with Disabilities Education Improvement Act of 2004 (IDEA) provide a framework for response to intervention. This framework also known as Response to Intervention (RtI) requires students to have effective instruction and their progress monitored before being referred to special education services in an attempt to ascertain a starting place for educational accountability (Barnett et al., 2004).

Although RtI is a permissible and encouraged part of the new version of the Individuals with Disabilities Education Act, it is a regular education activity and responsibility (Zirkle, 2007). IDEA 2004 authorizes and encourages school districts across the United States to implement policies requiring programs to incorporate evidence based practices into their instructions and assessments (Berkeley et al., 2009; Brown-Chidsey & Steege, 2005). IDEA also mandates that prior to a student being identified as having a learning disability the educational agency must identify a process that determines how the student responds to scientific, research-based interventions. The amendments to IDEA 2004 provide support for the use of response to intervention methods in the determination process of a specific learning disability, linking general education to social/emotional behaviors and other disabilities, and serving as a predictor for identifying at-risk students (Berkeley et al., 2009; Gresham, 2005; Hawkins et al., 2008).

A major component of the No Child Left Behind Act 2001 focuses on reading, and requires schools to use scientific knowledge to determine the selection of core curriculums, the utilization of valid screening measures, and progress monitoring to identify students in need of more intensive instruction (Fuchs & Fuchs, 2006). Years of

research findings document that reading deficits reflect students' inadequacies and lack of interventions within the curriculum (Gamm, 2009). NCLB also began the process of states developing and implementing a response to intervention process to support struggling readers in the least restrictive environment (Gerstan & Dominio, 2006).

The response to intervention model also evolved as a result of the President's Commission on Excellence in Special Education Report in which an emphasis was placed on response to instruction and progress monitoring for assessment and identification purposes (Pericola-Case, Speece, & Malloy, 2003; U.S. Department of Education, Office of Special Education and Rehabilitation Services, 2002). The Commission on Excellence in Special Education suggested that educators embrace a model of prevention that does not wait for student to fail before providing instructional methods and techniques as interventions that are scientifically-based (USDE, OSEAS). The report identifies the importance of considering children with disabilities as general education children first, and the need to implement models of response to intervention based upon progress monitoring data (pp. 7, 21). Barnes and Harlacher (2008) remind educators that RtI is more than an means of identifying students as having as specific learning disability, rather it is a way to ensure better educational outcomes for all students.

According to Noell, Freeland, Will and Gansle (2001) and Porter (2008), the response to intervention method for identifying students at-risk is not new to the field of special education. It builds upon applied behavior analysis and disability research that has evolved since 1970, and is influenced by reading researchers and behaviorally oriented school psychologist (Hawkins et al., 2009). More recently Campbell (2009)

specified that as a result of integrating and educating special needs students within general education classrooms, the flex model of instruction and differentiated instruction became common instructional techniques and are the predecessors to RtI.

The flex delivery model focuses on methods used to impact learning based upon assessment data (Ramsden, 1992). This model of instruction encourages educators to incorporate more flexibility into the existing curriculum to provide for a wider range of students' access to that curriculum (Bell & Lefoe, 1998). This method is similar to the methods and techniques utilized in differentiated instruction.

Differentiated instruction focuses on how materials are taught, and encourages educators to tailor instruction to meet the needs of students (Hall, 2009). The premise of differentiated instruction is based upon responsiveness to individual student's needs, ongoing adjustment of content, process and products to meet individual student's needs, and ideas and skills needed in a content area (Demos & Foshay, 2009). These characteristics are components that can be found in the current response to intervention framework.

The response to intervention model of instruction resembles and contains some of the same focal points as its predecessors. However, RtI differs from its predecessors by requiring documentation of data-driven progress monitoring based upon scientifically proven interventions (Barnett et al., 2004). Barnes and Harlacher (2008), reinforce this major difference of RtI by pointing out that the multiple tiers used in this method are designed around a continuum of services ranging from universal support for all students, to specialized instruction to those demonstrating a need for more intense instruction. The

premise of the framework of RtI is consistent among researchers. Fuchs, Mock, Morgan, and Young (2003) describe RtI as a means of providing assistance to struggling students through the utilization of group and individualized research based methods and techniques that have been evaluated for their effectiveness. Hoover and Patton (2008) concluded that RtI is a contemporary trend in education with a multi-tiered learning process and is utilized to provide students with a continuum of services designed to increase in intensity based on the severity of the students needs. Mellard, McKnight, and Woods (2009) believe that the emerging consensus behind RtI is its framework which includes universal screenings, tiered levels of high-quality interventions, progress monitoring, and data-based curricular decisions that improve the outcomes for struggling students. Powers and Hagan (2008) indicate that the primary tenet of RtI is the implementation of increasingly intense interventions suitably matched to students needs based on a failure to respond to less intensive interventions. Fuchs and Fuchs (2006) state the premise of RtI is to provide early interventions to all students at risk for school failure.

At present, there are identified tiered models of interventions intended to improve school achievement and social behaviors (Fuchs, 2003; Hawkins et al., 2008). The problem solving model and the standard protocol approach are the two basic models utilized when implementing a tiered approach to RtI (Fuchs et al., 2003). These models both require instructional interventions designed to increase in intensity to meet the needs of students (Berkeley et al., 2009). The models differ in terms of the number of levels in the process, who delivers the interventions, and whether the process is a precursor to an

evaluation to special education or if it is the evaluation itself (Fuchs et al., 2003). While the models differ in implementation techniques, they are similar in their purpose to provide effective instruction with progress monitoring before a student is considered for special education (Fuchs, Fuchs, & Speece, 2002).

Harrod (2009) stated that the creation of goals, quality professional development, the selection of appropriate programs and shared resources, stream lined communication, delivery of services, and staff buy-in are key components for successful implementation of an RtI model within a school district (p. 4). The core features of response to intervention are the same despite the model. The consistent features identified between the models are: (1) high quality research based instruction, (2) universal screening, (3) on-going progress monitoring, (4) researched- based interventions, (5) process monitoring during interventions, and (6) reliable measures (Bradley, Danielson, & Doolittle, 2005). By providing systematic and successive problem-solving instructional tiers in regular education, RtI may result in a coordinated continuum integrating regular and special education rather than their current separate entities (Zirkel, 2007). RtI is also a framework not a model designed to help school districts identify and support students before they fail (IRA, 2010).

Response to Intervention Framework in Illinois

A study conducted by Berkeley et al. (2009) found that Illinois is one out of six states that have mandated their schools to develop and implement RtI plans, and one out of ten states that provides guidance to its school schools and mandates that school based models be based on best practices. The Illinois State Board of Education (2008) position

is that RtI is a general education initiative that requires school wide collaboration and high quality instruction that is monitored to provide for a successful system of early interventions. In June of 2007, Illinois Administrative Code 226.130 provided the legal structure for the implementation of response to intervention in districts across the state (Illinois State Board of Education, 2010).

The State of Illinois supports the three-tier problem-solving model of RtI which consists of the following prominent components:

1. Usage of a three-tier system designed with multiple interventions that are high quality, research-based instruction/intervention matched to meet students identified as at-risk.
2. Universal screening process to promote early identification and the reduction of student referrals.
3. Scientifically based progress monitoring to assess response to intervention for all students by using data to measure a students learning rate over time and level of performance.
4. Educational decisions based upon student's response to instruction/intervention. (Illinois State Board of Education, 2008; Shinn, 2006).

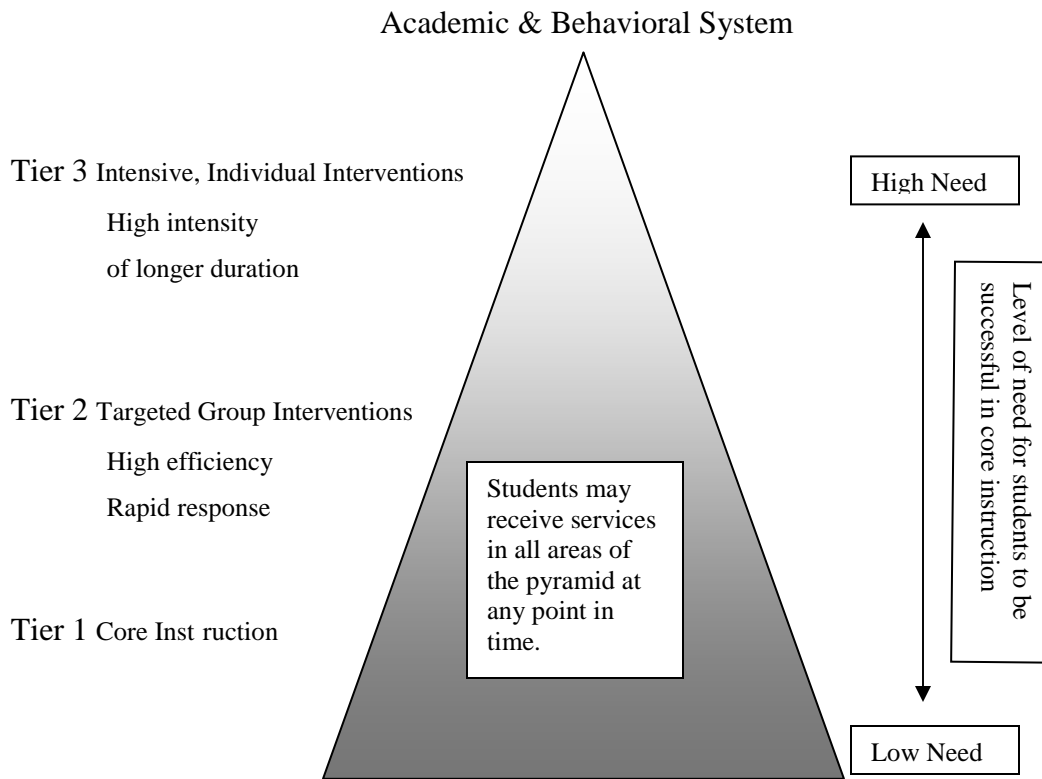


Figure 1. Conceptual Framework for Response to Intervention

RTI's three-tier model process encompasses the implementation of increasingly more intensive instructional interventions as a student moves from one tier to another. Tier 1 serves as the foundation and core researched-based instructional practices designed to support learning for all students within the general curriculum. Tier 2 provides supplemental instructions and short-term interventions that are to be implemented in addition to the core instruction to those students responding inadequately to Tier 1 instructional procedures. Tier 3 instructions are more intensive and individualized, and are used in conjunction with both Tier 1 and Tier 2 interventions to increase a student's rate of progress.

As a result, this model provides more progressively intensive supports, accompanied by more frequent progress monitoring of student achievement, in order to determine and implement the educational planning of a student based upon their educational needs. The recommended continuous monitoring leads to responsive levels of intervention being matched to the student's demonstrated academic achievement and rate of growth (Illinois State Board of Education, 2008). The framework suggested by the Illinois State Board of Education is consistent with the recommendations and findings of various multi-tiered approaches (Fuchs et al., 2003). This approach focuses on academic and behavioral interventions changing and increasing in intensity and duration between tiers, by creating smaller groups, and increasing the frequency in which student progress is monitored (Fuchs & Fuchs, 2006).

Student progress is monitored in the multi-tiered approach of response to intervention through the utilization of the problem-solving model. Brown-Chidsey and Steege (2005) states:

The steps involved in the problem solving model are aligned with specific assessments and instructional activities designed to reduce or eliminate a student's school difficulties. This model is designed to be used continuously and interactively. As one step ends, the next begins. (p. 6)

Teacher assistant teams often serve as the decision making agents that affect the decisions regarding the implementation and identification of interventions (VanDerhayden & Witt, 2005). The problem solving teams or teacher assistant teams, coordinate efforts to improve student performance through the utilization of intensive

interventions. The teams attempt to solve student problems by decreasing the discrepancy between expectation and current performances (Ninni, 2010). The teams of educators use four core concepts in determining and implementing interventions. They have been identified as:

1. Define the problem - Is there a problem? What is it?
2. Analyze – Why is it happening?
3. Develop a Plan -What shall we do about it?
4. Evaluate – Did our plan work? (Batsche et al., 2005; Brown-Chidsey & Steege, 2005)

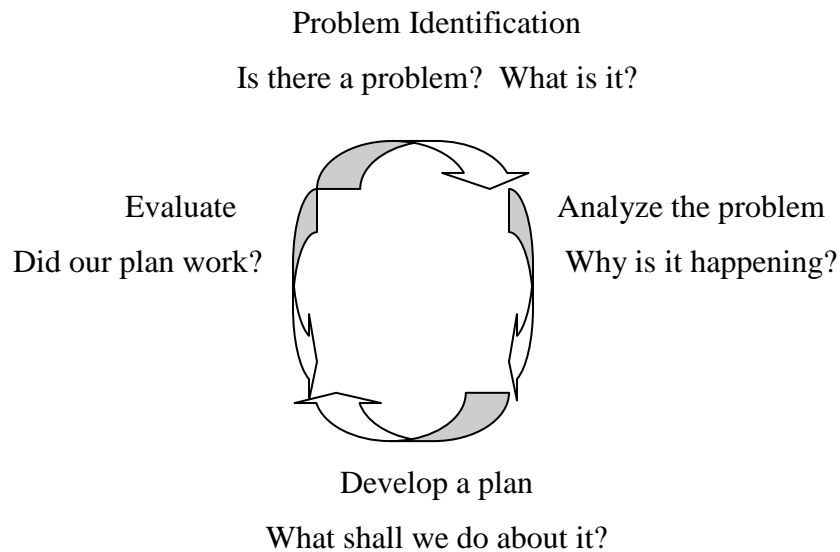


Figure 2. Problem Solving Method

Statement of the Problem

There is no set model for implementation of RtI (Bradley, Danielson, & Doolittle, 2005; Hilton, 2007). Klotz and Canter (2006) emphasize that while federal regulations offer guidance; each school district must develop and implement its own procedures based on state regulations, resources, and the needs of its students. School districts have begun the process of developing and implementing plans that follow the tenets of RTI; however, RtI implementation barriers exist (Spectrum K12, 2009). Gessler-Werts, Lambert, and Carpenter (2009) study found that while the implementation of RtI is growing in school districts, it has yet been determined what RtI looks like. They concluded that teachers and parents need to be able to identify who is to carry out each step in a school's RtI plan.

The RtI models being implemented in school districts draw skepticism due to a lack of research supporting their usefulness and school wide implementation (Fuchs, Deschler, & Reschly, 2004). For many educators, the question as to how should RtI be implemented in schools still remains. This question is the foundation of empirical research studies; however, few people understand how it is to be implemented by school based practitioners (Ardoin, Witt, Connell, & Koeing 2005; Hollenbeck, 2007; Mellard, McKnight, & Woods, 2009). Gessler-Werts, Lambert, and Carpenter, 2009 conclude that school practitioners' perceptions should be explored to address the usefulness of their training and practices as well as examine the school site to ascertain the congruency between theory and practice as it relates to determining the amount of time required for students to progress through the tiers. Their research proposals are

similar to Berkeley et al. (2009) research that implied that many questions and issues relating to RtI's implementation and training will arise as states and districts continue to implement the RtI process.

Klotz and Canter (2006) indicated that the identification of proven instruction, staff training, how to inform parents of the process, and how will students be identified as making adequate response to an intervention must be addressed in order to effectively implement the proposed framework of RtI. Research studies conducted by Spectrum K12 School Solutions, Inc, and leading educational organizations including the Council of Administrators of Special Education, American Association of School Administrators, the National Association of State Directors of Special Education, and State Title 1 Directors concluded in their 2009 survey, that districts are rapidly adopting and formulating intervention approaches designed to drive student achievement. Their study further noted that districts struggle with the implementation of RtI due to a lack of teacher training, intervention resources, and a comprehensive way to monitor and drive student achievement (Spectrum K12, CASE, NASDSE, AASA, and State Title 1 Directors, 2009). Studies done by colleges and universities in an attempt to identify students whose needs require quality instruction; however, limited implemented school district models have been studied (Pericola-Case, Speece, & Molly (2003). Berkeley et al. (2009) study supports previous studies by indicating that while more states have begun implementing some form of the RtI model of intervention, a lack of specificity in assessments, intervention implementation, and selection of research based practices and

fidelity concerns remain. Fuchs and Fuchs (2006) indicate that there is still much that needs to be learned about the process to ensure and promote effective early interventions.

Purpose of the Study

Research done by Noell, Freeland, Witt and Gansle (2001) focused on the diverse needs of students, and pointed out that as a result of the diverse learning needs of students educators need to try different techniques. The call for a new approach to educate students was the focal point for the 2001 President's Commission on Excellence in Special Education Report. The Individual with Disabilities Education Improvement Act and the No Child Left Behind Act of 2001 suggest that schools develop and implement response to intervention plans to assist struggling students (National Association of State Directors of Special Education, Incorporated & Council of Administrators of Special Education, 2006).

The trend in education requires that all professionals within the school environment work together rather than in isolation to assist student who are identified as at-risk (Welch, Brownell, & Sheridan, 1999). RtI requires that teams of educators within the school environment make a series of data based decisions regarding a student's academic progress (VanDerHeyden, Witt, & Gilbertson, 2006). Research suggests that the problem solving teams' cohesiveness is a key component in the effectiveness of a district or school's RtI model (Burns, Appleton, & Stehouwer, 2005). The successful implementation of an RtI model has the potential to provide flexible and accurate prevention and service delivery interventions in the least restrictive environment.

Hawkins et al. (2008) concludes that the successful implementation of an RtI framework within a school setting will be based upon appropriate training of educational professionals. Their summation is found in the research done by Hollenbeck (2007) in which the research emphasizes the importance of researchers to not overlook the importance of collaboration by practitioners in the RtI process. Curl (2009) suggested that the needs of more students can be met through collaborative methods by all school practitioners within the general education setting. This collaboration encompasses the work of special education, general education, speech pathologist, school psychologist, and other school professionals to work together to identify and implement interventions within the least restrictive environment (Hawkins et al., 2008; Porter, 2008).

A case study approach was used to analyze how a Chicagoland suburban school developed and implemented an RtI process utilizing the three-tier problem-solving model. Ofieshi (2006) proposed that RtI models have forced educators to attempt to define and discuss what adequate instruction looks like for all learners. This study analyzed certified staff training and perception of a district's RtI process. This research study gathered data and drew conclusions regarding one districts approach to the training and implementation of their RtI model; by reviewing artifacts, interviewing and surveying certified staff members.

Fuchs and Fuchs (2006) believe that the implementation of RtI will impact the type of professional in-services conducted by universities and school districts. This study examined the type and number of staff in-services the district implemented in its three-tier model of RtI. District and building administrators in addition to certified school staff

were interviewed to ascertain their perception of their training, and the implementation of the district's RtI plan.

Research Questions

Using the Illinois State Board of Education mandate that Illinois schools must implement a tiered intervention system beginning the 2010-2011 school year, the following research questions examine how one district began and implemented their response to intervention process:

1. How were certified staff trained to implement RtI as indicated by a review of districts artifacts?
2. What is certified staff's perception of the RtI plan within the district?

Significance of the Study

Researchers in the field of education have identified the need for additional studies directly related to the implementation of RtI at the local school level (Bradley, Danielson, & Doolittle, 2007). Few studies have examined the implementation of RtI at school site implemented by local school personnel (Newman-Jacobs, 2008). Given the mandated implementation by the Illinois State Board of Education, research in this area is of importance to examine both research conclusions and the remaining questions related to RtI (Hollenbeck, 2007). This research study was designed to add to the knowledge base of the implementation and development of RtI at the local school level. This study analyzed teachers' perceptions as they relate to the implementation of a problem-based model of RtI. The analysis examined the structure, roles, resources, and training that impacted as well as aided in the implementation of a local school based RtI model. This

research was also intended to assist other districts in understanding the relationship that training, resources, and perceptions play in the implementation of a successful Response to Intervention plan.

Definition of Terms

Many of the terms can be found in educational literature and are terms commonly used by educators. The following terms are defined to provide clarity to the meaning and terminology of words or phrases commonly used throughout this study.

At-Risk Students - Students whose academic level of performance and rate of performance falls below the level and rate of their grade level peers (Pericola-Case, Speece, & Malloy, 2003).

Certified Staff - School employees that have completed an approved Illinois teacher preparation program for the type of certification sought, and hold a valid certificate issued by Illinois (23 Illinois Administrative Code 25.25).

Curriculum-Based Measurements - A set of standardized and short duration tests used to evaluate the effects instructional interventions (Shinn, 2007).

Intervention - A specific skill-building strategy implemented and monitored to improve a targeted skill (Curl, 2009).

Progress monitoring - A form of assessment used to measure a change or lack of in a student's level or rate of learning (Fuch & Fuchs, 2006).

Response to Intervention (RtI) – Research based differentiated curriculum strategies utilized with all students within a three-tier problem-solving system that provides all students with scientific research-based interventions, continuous research-

based progress monitoring, and educational decisions based upon a student's response to the type and amount of supports rendered (Hilton, 2007; Illinois State Board of Education, 2008).

Scientifically-based Curriculums - Practices and programs that have been thoroughly and rigorously reviewed to determine whether they produce positive educational results in a predictable manner (Illinois State Board of Education, 2010).

Teacher Assistant Teams - Teams of educators who provide support to other teachers to bring all students to acceptable levels of proficiency (Bahr & Kovaleski, 2006).

Three-Tiered Model - Three levels of intensity with instruction provided based on the individual needs of the student. Tier 1 universal interventions are provided to all students as a means of being preventive and proactive. Tier 2 targeted group interventions are high efficiency rapid response interventions utilized with some students. Tier 3 intensive, individualized interventions are provided in longer duration with high intensity targeted specifically for individual students (Samuels, 2008).

Universal screening - Screening of students to determine their level of instruction. Screening is typically done three times a year to assure that the core instruction is performing satisfactorily (Renaissance Learning, 2009).

CHAPTER II

REVIEW OF LITERATURE

Introduction

Response to intervention implementation within a school setting is the basis of this literature review. The section on policies and laws focuses on the historical perspective of response to intervention and its impact on education followed by a focus on the response to intervention framework. Attention is given to each of the three response to intervention models (problem-solving model, standard protocol model, and mixed method), techniques, and educators' roles. The research related to response to intervention is summarized and synthesized.

The literature review provides a conceptual framework directed towards the assumptions upon which this study was undertaken. It also clarifies the relationships that exist between state mandates, certified staff's perceptions, training, and the response to intervention framework. Specifically, this study examines how certified staff's training and perception impacts RtI's implementation within the school environment.

Historical Perspective of Response to Intervention

The origin of the response to intervention method of instruction is debated throughout literature. The documentation of RtI is primarily thought to have originated by Stanley Deno's data based program modification model to address academic skills in the early 1970's and John Bergan's behavioral consultation model (Batsche et al., 2005;

Fuchs et al., 2003; Hawkins et al., 2008). Welch, Brownell, and Sheridan (1999) credit Madeline Will's (1986) paper to the U. S. Department of Education as the beginning of RtI. Will recommended a change in implementing in the service delivery model for educating special needs students by: increasing teacher collaboration and increased instructional time, enhancing support systems for teachers, using new instructional approaches, and building level empowerment (Will, 1986).

Ardon et al. (2008) believes that RtI evolved in the 1980's by Heller, Holtzman, and Messick critique of the IQ-achievement discrepancy model. Over the years, educators have expressed their concerns regarding the over identification of students as learning disabled (President's Commission on Excellence in Special Education, 2002). These concerns have lead to a decrease in confidence in the discrepancy model as a means of identifying students as learning disabled (Cox et al., 2003).

Heller, Holtzman, and Messicks (1982) report for the National Research Council (NRC) was a request of the Office of Civil Rights of the U.S. Department of Education to study the over representation of minorities and males in special education. The study focused on the quality of instruction, assessment procedures, and referrals for students receiving special education services (Porter, 2008). Their findings resulted in the following recommendations for programming for special education students: (1) assessment of the quality of general education programming, (2) assessment of special education programming to ensure improved student outcomes, and (3) reassessment of the accuracy and meaningfulness of the identification of a disability process (Heller et al., 1982). There findings and recommendations support the argument that the IQ-

achievement discrepancy score is unreliable and fails to impact instruction in important and meaningful ways (Hintze, 2008).

In 1983, the National Commission on Excellence in Education published “A Nation at Risk.” Their report accused American society and its educational systems of losing sight of the basic purposes of schooling, and for not possessing the high expectations and disciplined efforts needed to attain them. The statistics quoted in this report indicated that 23 million American adults were functionally illiterate, 13% of all 17 years olds were functionally illiterate, and minority children’s illiterate rate ranged as high as 40%. As a result of their findings, the American educational system was found to be inadequate. In an attempt to improve the quality of education rendered to American children, the Commission recommended the following changes: (1) training of highly qualified teachers, (2) implementation of measurable standards to promote higher expectations for academics and behavior, (3) more effective use of school time devoted to learning the basics, and (4) elected officials and educators should be held accountable for providing fiscal support and stability in education reform movement.

The results and recommendations of the Nation at Risk Report lead to the development of national educational goals (Austin, 1995). These goals allowed the federal government the opportunity to define its role in education by developing a comprehensive approach to help all children learn (Austin, 1995). The recommended approaches called for the promotion of social emotional learning standards, professional development for teachers, and demonstrated student competency in the areas of reading,

math, language, science, and social studies. The national goals became known as Goals 2000 or America 2000.

Goals 2000: Educate America Act was passed on March 31, 1994. This act served as a nationwide pact that promoted a comprehensive approach to help all children succeed in life by measuring student educational output (Austin, 1995). State and local educational agencies implementation of Goals 2000, focused on ensuring that all children meet high academic standards. To ensure students met the targeted goals, institutional and instructional changes were emphasized in the form of curriculum and instruction, professional development, assessments and accountability, school leadership organization and parental and community involvement that align with content and performance standards (Goals 2000). To further assist states and school districts in gauging student growth, Goals 2000 recommended that each educational institution develop well-defined means for measuring, reporting, and supporting student progress.

Rationale for Response to Intervention

Former U.S. Secretary of Education Richard W. Riley believed that the mission of helping schools raise their academic standards required a fundamental change in the structure of American education (Goals 2000). The implementation of RtI and its concepts requires a paradigm shift (Ardon et al., 2005). The ideology and framework surrounding response to intervention framework addresses the prevention of school failure. This framework requires school districts to rethink and reexamine their quality of instruction, reevaluate who and how they identify students deemed at-risk for academic failure, and reassess when students are referred for special education services.

For decades, students were not identified as needing additional educational support until their skills in an area were widely discrepant from expectations. This model of relying on academic failure to trigger additional supports for a student has been dubbed the “wait-to-fail” model (Reid, 2002). This model runs counter to years of research demonstrating the importance of early intervention (President’s Commission on Excellence in Special Education, 2002). This model also assumes that a student’s academic problems lie in the student, and not in the curriculum or instruction they are receiving (Special Ed Connection, 2010). IDEA 2004 revised the identification process by turning the focus away from the “wait-to-fail” model, and encouraged states and school districts to take advantage of response to intervention methods.

RtI is defined as a service delivery model that utilizes a multi-tier problem-solving approach that focuses on the utilization of scientifically-based instruction through progress monitoring and curriculum based measurements. Through the use of scientifically-based instruction, RtI is designed for students to receive the optimal amount of interventions to bring about a desired change in academic and behavior performances prior to being referred for special education (Batsche et al., 2005; Berkeley et al., 2009; Brown-Chidsey & Steege, 2005; Hawkins et al., 2008). IDEA 2004 revised, provides states with the option of determining whether an underachieving student is eligible for special education when their academic performance fails to improve once increasingly supported intensive interventions have been implemented (Powers & Hagans, 2008). As a result, students no longer have to “wait-to-fail” before being recommended for additional support within the general education setting (Morrison, 2005).

Barnett et al. (2006) predicted that RtI would evolve rapidly, resulting in evidence of sound processes that focus on improved student outcomes in the least restrictive environment. A consensus amongst educational researchers suggests that RtI approaches should consist of the following elements (NJCLD, 2005; U.S. Department of Education, 2006b):

1. Students receive high-quality instruction in their general education classroom.
2. General education instruction should be research-based.
3. Classroom staff members conduct student assessments.
4. School staff members conduct academic and behavioral universal screenings.
5. Classroom progress requires continuous progress monitoring.
6. School staff members implement specific, research-based interventions to address students who have been identified as having difficulties.
7. School staff members use progress-monitoring data to provide a record of a student's response to intervention.
8. Fidelity measures are needed to assess and determine if interventions are implemented as intended and with consistency.

Hawkins et al. (2008) research found that RtI will continue to evolve with core characteristics forming the bases of state initiatives founded on interventions and instructional practices.

Educational Policies, Laws, and Response to Intervention

Laws and initiatives supporting the response to intervention framework stress the importance of holding schools accountable for all student progress. As a result, the federal government now holds schools accountable for improving educational outcomes for all students (Stollar et al., 2006). Research identifies the significance of specific laws and initiatives impact on the response to intervention framework (Batsche et al., 2005; Brown-Chidsy & Steege, 2005).

No Child Left Behind Act

The Elementary and Secondary Education Act or The No Child Left Behind Act (NCLB) of 2002 mandated that schools provide high-quality education with scientifically-based practices for all students. NCLB was developed as a result of the findings of a study conducted by the National Reading Panel (NRP) in 2000. Prasse (2006) stated the NRP and NCLB emphasize that scientifically based reading instruction will address the scope and sequence of reading instruction (phonemic awareness, phonics, fluency, vocabulary, and comprehension), as well as the teaching of early literacy skills (p. 11). NCLB guidelines mandate that student progress is measured through data collection and analyzed to determine if adequate yearly progress is made.

A major component of NCLB is the documentation of statewide accountability which requires all schools and districts to make adequate yearly progress. Stollar et al. (2006) stated:

To demonstrate that a high-quality education is provided for all students, schools must establish a timeline of benchmarks with the U.S. Department

of Education for demonstrating that 100% of their students are making adequate yearly progress in academic subjects by 2014, as measured by statewide achievement tests. (p. 181)

To assist students in making adequate yearly progress, teachers are required to be highly qualified, academic programs are to be scientifically based, and progress monitoring should be ongoing to identify the effectiveness of instructional services. Beyond having a direct focus on the improvement of student reading abilities; NCLB requires that all students reach high standards in the academic areas of math, reading, language, and science.

As a result of NCLB mandate that students make adequate yearly progress, the Reading First initiative was developed. The policymakers who developed the response to intervention concept were responsible for the Reading First initiative (Fuchs & Fuchs, 2006). Reading First requires the use of scientifically based instruction and assessment in the five core components of reading: phonemic awareness, phonics, fluency, vocabulary, and comprehension. This initiative requires schools to use scientific knowledge to assist in the selection of core curricula, valid screening measures, and progress monitoring to determine what students need additional intensive instruction in this area. Professional development is also an essential component in securing techniques, methods, ideology, and materials needed to instruct and support students with and without reading difficulties (Illinois State Board of Education, 2008).

The President's Commission on Excellence in Special Education Report

The President's Commission on Excellence in Special Education Report points out that all students benefit from having highly qualified teachers who implement scientifically-based practices that include universal screenings and progress monitoring based on response to intervention techniques. The relationship that exists between assessments and interventions are also acknowledged within the report (Prasse, 2006). Prasse also suggested that assessments should target specific learning and behavior needs, and not focused on normative comparisons based on standardized tests. Prasse also believes that how a student responds to a scientifically based interventions delivered with integrity (i.e., actually implemented as intended) should be a part of the assessment process. Prasse goes on to express that "children who are not the beneficiaries of effective interventions are just as likely to be curriculum casualties as they are to be students with disabilities" (p. 9).

Individuals with Disabilities Education Act

The Commission on Excellence in Special Education Report cited the Individuals with Disabilities Education Act (IDEA) of 1997 for providing for more effective instruction and strong interventions usage in the general education curriculum. Their findings acknowledged the need to embed into special education law the expectation that children should not be identified as having learning disabilities if they have not been exposed to scientifically-based general education instruction. IDEA's response to intervention method drew national attention on successful practices in the general education classroom and the need for research based interventions, progress monitoring,

accountability, and access to the general education curriculum for all students (IDEA; NASDSE & CASE, 2006). In an attempt to assist students in receiving high quality interventions within the general curriculum, IDEA allows local educational agencies to use special education funds to provide early-intervention services to students identified as being at risk.

These laws and mandates consist of the same components but differ slightly. NCLB and the IDEA both underscore the importance of providing high quality scientifically-based instruction and interventions while holding schools accountable for student progress (Klotz & Canter, 2006). IDEA provides local educational agencies with the choice of using the traditional discrepancy model to identify students who have a learning disability, or the choice of measuring a student's response to intervention as a means of determining eligibility for special education. NCLB requires that student make adequate yearly progress. The Reading First initiative requires the use of scientifically based instruction and assessments in the essential components of reading. The President's Commission on Excellence in Special Education calls for the implementation of a response to intervention plan based upon progress monitoring.

States and school districts techniques vary on how to implement a systematic and effective response to intervention process (Miller, 2006). Gessler-Werts, Lambert, and Carpenter (2009) study found that there is no single method that possesses more validity than another in the training and implementation process. Hoover et al. (2008) discovered that out of the 41 states participating in their study, 93% of the respondents reported training efforts that focused on progress monitoring procedures, data driven decision

making, and an overview of the RtI principles and practices. In a similar study conducted by Berkeley et al. (2009), 35 (88%) of the 50 state departments of education have response to intervention professional development workshops offered in their school districts. According to their study, the delivery of professional development varies widely. Berkeley et al. (2009) indicated that some state departments of education utilize universities for the delivery of professional development opportunities for staff, while others such as the State of Illinois have developed their own resource centers.

Response to Intervention and the State of Illinois

The Illinois State Board of Education (ISBE) suggests that a successful RtI plan will assist school districts in establishing a framework to meet the diverse learning needs of all Illinois students. In June of 2007, ISBE adopted the usage of research-based interventions for use in schools across Illinois. Effective January 1, 2009, all school districts in the state were required to have a district's Response to Intervention Plan in place to assist them in transitioning to research-based interventions. According to the state guidelines, the RtI plan has to meet the diverse needs of all students and be developed and implemented by the beginning of the 2010-2011 school year. The plan has to identify the type and amount of staff training and technical assistance a district requires to support comprehensive training and the implementation of sound educational practices (ISBE, 2008). To assist districts in the planning process, ISBE identified the following seven major components that must be present in order for full implementation to occur:

1. Consensus building and collaboration

2. Standards based curriculum and research based instruction
3. Research based assessment practices
4. Student intervention and a problem solving team process
5. Intervention strategy identification
6. Resource allocation
7. Ongoing professional development

The State of Illinois's RtI framework is comprised of a three-tier (prevention, secondary, and tertiary) problem-solving response to intervention model. This model supports decision making by school staff and has an integrated data system that drives the instruction process. It is the hope of ISBE that this framework will serve as the catalyst for comprehensive training and implementation of research based educational practices (ISBE, 2008).

Through the support of the three-tier model of RtI, the State of Illinois allows schools to use different universal screening methods and scientifically based interventions at different grade levels to promote high quality instruction. Consistent with federal regulations, ISBE emphasizes that RtI is a general education initiative that requires collaboration between district educators to be effective. As districts within the state begin to implement their plans, they are reminded that continuous monitoring and identification are the foundational pieces to a successful response to intervention system (Illinois State Board of Education, 2008).

Response to Intervention Models and Techniques

Literature suggests that the implementation of the RtI process is commonly implemented through a problem solving model, a standard protocol approach, or a mixed method of the two models (NJCLD, 2005). Bradley, Danielson, and Doolittle (2005) and Campbell (2009) research indicates that there is no single model of RtI has been found to be more successful than another, and all models consist of the same core features. High quality research based classroom instruction within the general curriculum, universal screening, progress monitoring, and scientifically research based interventions are the fundamental core features found that exist amongst all models of RtI (Bradley, Danielson, & Doolittle, 2005). These core essential fundamental features have been found to be implemented in a tiered framework with ongoing progress monitoring and extensive data collection.

The tiered instructional process is the heart of the RtI process (Shapiro, 2009). It represents a model of instruction that varies in form and implementation based on the nature and severity of a student's learning or behavioral difficulties. Research conducted by Vaughn (2003) found that the tiered system provides layers of interventions designed to meet the needs of students and increases in intensity across the tiers. It represents a model of instruction that varies in form and implementation based upon the nature and severity of a student's learning or behavioral difficulties. Student movement throughout the tiers is based upon problem identification, problem analysis, plan evaluation, and problem evaluation that occurs through assessments and data collection in each tier. Research conducted by Hoover and Patton (2008) express the belief that an effective

three-tier model must be dynamic and fluid in providing instructional programming. Shapiro (2009) studied several school districts first years of using a tiered system and found that student growth of 50% to 70% was deemed successful. The most common tiered system used is the three-tiered model approach.

Tier 1 is described as the preventive tier that encompasses the core curriculum and programming (Batsche et al., 2005). All students receive Tier 1 instruction; therefore, school districts spend significant money and time to ensure that the core curriculum is implemented with a high degree of integrity through highly trained teachers (Shapiro, 2009). School districts also form committees, provide workshops, and allocate funds to ensure curricula are chosen to meet the needs of all students. Research done by Batsche et al. (2005) suggests that between 75% to 80% of all students receive Tier 1 interventions. In this tier, all students are screened using a universal screening tool three to four times a year. The screenings results are analyzed and used to track student progress and movement within the tiers. Tier 1 interventions are also classroom based and implemented by the general education teacher within the regular education classroom setting.

Tier 2 is referred to as the secondary intervention tier (Berkeley et al., 2009). Research implies that 10% to 15% of all students screened will fall into the Tier 2 category (Batsche et al., 2005). Fuchs and Fuchs (2006) research concludes that this tier is composed of students who are unresponsive to classroom based interventions. Berkeley et al. (2009) stated the difference that occurs between Tier 1 and Tier 2 varies

depending on who implements the interventions to a targeted group of students and from state to state depending on how state interventions are developed.

Tiers 2 and Tier 3 are similar in terms of the interventions used. A study conducted by Fuchs and Fuchs (2007) indicated that students in these tiers are targeted for small group instructions with close progress monitoring in addition to the supports received by all students in Tier 1. The difference between the interventions used in Tier 2 and Tier 3 are found in the duration, intensity of instruction, and the frequency of progress monitoring (Speece & Walker, 2007).

Tier 3 services vary the most, and are referred to as the tertiary tier which includes the most intensive interventions. This tier is composed of between 5% and 10% of the students screened (Batsche et al., 2005). According to Speece and Walker (2007), these students are identified as being at a high risk of failure and considered special education students in some models.

Consensus among researchers exists in this tier as it relates to its characteristics. Tier 3 requires students to receive more intensive individualized interventions with longer durations for implementation and frequent progress monitoring (Speece & Walker, 2007). Research further suggests that these interventions be provided on a one-to-one basis (Speece & Walker, 2007).

Despite the consensus found amongst researchers, Berkeley et al. (2009) found that major differences exist between states in this tier. Depending on the state, Tier 3 interventions are either implemented in a small group, individualized, or a combination of

the two. Their research also concludes that inconsistencies can be found as to when a student should be referred for special education.

Research supports the response to intervention tiered early intervention frameworks ability to improve the academic performance of at-risk students (Hughes & Dexter, 2009); however, literature recognizes that when initially implemented, an RtI model identifies a high number of students who require interventions beyond Tier 1 (Shapiro, 2009). Educational literature further surmises that the tiered approach success is based upon team collaboration or a teams approach. Professional collaboration is used to identify and address students at-risk through the use of increased levels of interventions and monitoring for non- responsiveness to instruction through data base decisions (Fuch et al., 2003; Kovaleski et al., 1999; Martson, 2005).

Problem Solving Model

The framework used to implement the problem solving method varies; however, the problem-solving model is the most prevalent framework implemented (Fuchs et al., 2003). A study conducted by Barnes and Harlacher (2008) concluded that the problem solving method follows a heuristic model where problems are identified and interventions are implemented and evaluated. Students' academic problems are identified, and interventions are used and assessed to evaluate their effectiveness in decreasing the gap that exists between students' current level of performance and their expected level of performance. They describe this model as a systematic data driven process driven by collaboration between educators who review student progress and select interventions to provide to struggling students at each tier. This process according to Fuchs et al. (2003)

is inductive and empirical and proves that one intervention is not more effective than another for all or one student.

The problem solving model is one of the core features found within the three-tier framework. Literature and school based studies suggest that the problem solving model addresses students' deficits by implementing research based interventions designed for them based upon a decision that is made by a school based team (Berkeley et al., 2009; Marston et al., 2007). Kovaleski and Glew (2006) stated that the problem-solving model implementation in the context of collaborative teams has over time evolved from a process to assist teachers with difficult to teach children... (p. 16).

Their research further implies that problem solving teams are viewed as integral parts of the three-tier model, and use an alternative method to the identification of students as learning disabled. Research by Tilly (2003) concurs with Kovaleski and Glew (2006) by indicating that utilizing the problem-solving method decreases the number of students placed in special education.

The problem-solving method addresses four questions when implementing and selecting interventions to address a student's area of need. They are:

1. Define the problem- Is there a problem? What is it?
2. Analyze- Why is it happening?
3. Develop a plan- What shall we do about it?
4. Evaluate – Did our plan work?

At each of the three tiers, teacher assistance teams collaborate to review student progress and determine if any additional supports are needed. The teams attempt to solve student

problems by decreasing the discrepancy between expectation and current performance (Ninni, 2010).

Standard Protocol Model

According to Fuchs et al. (2003), the standard protocol model is the RtI approach most preferred by researchers, but rarely implemented by practitioners. This model utilizes a standard treatment protocol for all children (Fuchs & Fuchs, 2006). Students identified as requiring additional support receive a predetermined research-based intervention implemented for a fixed duration (Newman, 2008). Gresham et al. (2005) report that one advantage of the standard protocol approach is that it may afford better quality control of instruction. This is done by using highly effective approaches to address academic deficits thus resulting in the quality of the intervention not being impacted by the training and background of the problem-solving team (Fuchs & Fuchs, 2006). According to Fuchs (2003) this treatment method is also preferred due to the lack of perceived validity in the problem-based model and provides schools with an economical approach to providing educational resources to students.

A study conducted by Berkeley et al. (2009) found that this model groups students with similar difficulties together. Once the grouping is complete, students are instructed using research based interventions that are standardized, preselected, and proven effective for their particular deficits and school resources (Johnson et al., 2006). Hollenbeck (2007) implies that this model requires removing students from the general education environment for an extended amount of time to render the implementation of pre-selected interventions. Further analysis of this model in the literature indicates that while the

interventions are still provided in tiers, additional studies are needed to determine the length and intensity of the services provided.

Mixed Model

According to research conducted by Hollenbeck (2007), fewer studies have been done on the mixed model approach in comparison to the problem-solving and standard protocol approaches. The mixed model framework is a problem solving method that uses standard treatment interventions integrated into the general education setting. This approach maintains its problem solving focus while applying standard protocols across general education classroom, targeting student needs at Tiers 1 and 2 via group-level intervention. This is done by identifying students' deficits through assessments, then placing students in groups to address their deficits in lieu of providing individualized intensive instruction. It is further documented in Hollenbeck's research that the utilization of this model in 36 schools resulted in a 41% drop in special education referrals between 1996 and 2004.

According to research by Berkeley et al. (2009), ten states currently implement a mixed model approach to RtI. One of the states that utilize this method is Arizona. VanDerHeyden, Witt, and Gibertson (2006) conducted a study on the STEEP (System to Enhance Educational Performance) model used in that state. Their study was designed to evaluate the referral, identification process, and student outcomes of the STEEP framework. Students participated in universal screenings, class wide interventions, performance/skill deficit assessments, and individual interventions. The overall findings of the study concluded that this model method decreased the number of students

receiving special education services. This method also proved to be cost effective in reducing the resources devoted to traditional assessments in lieu of direct assessments, interventions, and consultation services in classrooms. Finally the study concluded that fewer students were evaluated because fewer students were discussed by the decision making team; thereby, reducing the number of pre-referrals (VanDerGeyden, Witt, & Gibertson, 2006).

Ardon et al. (2008) conducted a study for the purpose of demonstrating the effectiveness of a three-tiered RtI model. Their findings concluded that many variables contribute to intervention effectiveness. They questioned whether interventions of sufficient strength can be delivered by practitioners with sufficient integrity, adequate duration, and frequency in any of the three models of RtI. Burns, Appleton, and Stehouwer (2005) also studied the effectiveness of RtI on improved systemic and student outcomes. Their research found that both systemic and student outcomes improved when using an RtI model. Their study found that on an average less than 2% of the student population was identified as having a learning disability when using an RtI model.

Response to Interventions Studies

Four studies are commonly found in the literature regarding the implementation of RtI methods: the Minneapolis Public School's Problem-Solving Model, the Heartland Area Education Agency, the Pennsylvania Instructional Support Teams and, and the Ohio Intervention Based Assessment. According to research done by Fuchs et al. (2003), these studies used a recursive and increasingly intensive pre-referral intervention approach focused on remediation rather than identification. These field studies also

provide evidence of the core factors necessary to consider during the implementation and assessment of RtI problem-solving models (Newman, 2008). Each of these individual studies focus on one of the key tenets of RtI; the utilization of classroom teachers to implement and monitor interventions within their individual classrooms, curriculum based measurements, teacher training, and regional networking.

The Minneapolis Public School System

The Minneapolis Public School System used curriculum based measurements in their problem-solving approach for measuring student growth. Their problem-solving model focused on individual problem solving in the general education setting. Classroom teachers were held responsible for implementing and monitoring instruction and interventions within their classrooms. If their selected interventions were unsuccessful for assisting a student in progressing, a problem-solving team collaborated on strategies and interventions to be used in the general education setting. The teams monitored progress towards their goals and when needed reconvened and identified new strategies. Marston et al. (2007) stated that the problem-solving method enhanced the schools effectiveness in meeting student academic and behavioral needs in three major areas: contribution to the schools improvement planning process, focus on student response to intervention may have reduced the effect of possible test bias, and the data-based approach lead to an evaluation of the continuum of interventions and services used to accelerating student achievement (p. 269).

Further research of the Minneapolis Public School System's problem-solving approach identified limitations due to the impracticality of control groups, limited time

and resources for staff to analyze data, and a focus on student needs rather than best practices interventions (Marston et al., 2007). Reschly and Starkweather (1997) as cited in Newman (2008) found that the pre-referral intervention process provided a 75% overlap between students being identified for special education and those identified through the state's traditional criteria. An overall review of this model notes the importance of developing the roles and responsibilities of the personnel involved in the problem solving method to ensure the validity and reliability of the decision-making process (Marston, Lau, & Muyskens, 2007).

The Heartland Educational Agency

The Heartland Educational Agency (HEA) in Iowa developed a statewide alternative system for identifying and assisting students experiencing difficulties in the classroom. The HEA is a four-tier mixed-model system that incorporates scientific methods and research based practices (Tilly, 2003). Student problems are objectively defined, observed, and measured directly in a student's natural environment where problems are analyzed and techniques derived.

Progress is monitored and feedback is used to reanalyze or change interventions. Tilly (2003) emphasizes the usage of curriculum based measurements and systematic interventions in this model. Student data is collected to validate the effectiveness of the interventions and to develop a systematic method for data-based decision making. This model also focuses on evaluating staff competency in applying problem solving practices (Ikeda et al., 2007).

The Pennsylvania Instructional Support Team

From 1990-1995, all school districts in Pennsylvania used instructional support teams (teacher assistant teams). The Pennsylvania Board of Education introduced these teams to teachers as a means of reducing referrals for special education through the use of problem-solving methods. Trained teachers collaborated together to examine whole-group instruction using curriculum based measures in a three-tier model of service delivery to facilitate problem identification, select instructional strategies, monitor student progress, and determine effectiveness of the instructional strategies. Hartman and Fay's (1996) study on the instructional support teams found that the Pennsylvania schools referred a third fewer students to special education, and educated a larger number of students within the general education curriculum with this method. A study conducted by Kovalski et al. (1999) gave credence to the Pennsylvania instructional support team approach when they indicated in their findings that performance levels in those schools only increased when schools used their support teams to a high degree, and treatment integrity was critical to its implementation.

The Ohio Intervention-Based Assessment

The Ohio Intervention-Based Assessment is a three-tier pre-referral problem solving method that includes collaboration consultation. Multidisciplinary teams were developed to implement the problem-solving procedures. A study done by Telzrow et al. (2000) was conducted to determine the fidelity of the process as it related to student outcomes. It was determined that student outcomes and integrity was low. The identifying factors contributing to the low integrity were: teachers' resistance to change,

teacher's lack of skills, knowledge, and ownership of the process, and inadequate resources in the general curriculum. These barriers resulted in the unsuccessfulness of the implementation process (McNamara & Hollinger, 2003).

Telzrow et al. (2000) research indicated that overall improvement in student outcomes was found in the Ohio problem-solving method. To further enhance and implement a more reliable system, Ohio enhanced their intervention model through regional networks for collaboration, support and training (Newman, 2008). Components to ensure reliability and validity of the process through professional development were added to their model in an attempt to improve the quality and efficiency of their model (Grimes, Kurns, & Tilly, 2006).

Professional Development

Spectrum K-12 School Solutions, CASE, AASA, NASDSE, and State Title 1 Directors conducted a study to determine the perceived critical implementation factors of RtI. Their study found that districts' believe that insufficient teacher training is an obstacle for successful implementation of RtI. Literature supports the premise that successful implementation of the response to intervention process depends greatly on the quality of the professional development models provided (Fuchs & Fuchs, 2006; Fuchs & Fuchs, 2001; Glocker, 2003; Gessler-Werts, Lambert, & Carpenter, 2009; Hollenbeck, 2007; Samuels, 2008). NASDSE and CASE (2006) stress that professional development must include three components of skill development to be successful: beliefs and attitudes, knowledge, and skill. Reschly (2003) found that the feasibility and

consequences of implementing an RtI model depends heavily on the supports made available during the initial change process.

A study conducted by Pericola-Case, Speece, and Molly (2003) concluded that the implementation of the RtI process and its outcomes are impacted by the stakeholders. Their reliability, validity, and buy-in of the total process impacts the student's optimum learning environment as it relates to the fidelity of implementation. RtI implementation studies stress that its success and execution is the responsibility of all the educational stakeholders. These studies also stress the importance of understanding the relationships professionals have in the process, the obstacles districts and schools face in regards to staff training, progress monitoring, student achievement, resources, and how they impact the implementation of the RtI framework (Samuels, 2008; Spectrum K12, CASE, NASDSE, AASA, and State Title 1 Directors, 2009).

The NASDSE (2006) stressed the idea that attitudes and beliefs must embrace the conception that all children can learn. A successful, reliable, and valid RtI system depends on the ability of general and special educators. The required skills, beliefs, and attitudes needed to sustain RtI should be ascertained through successful and proper professional development (Berkley et al., 2009; ISBE, 2010).

Few studies have analyzed a school's initial implementation steps and continued development towards the successfully implementation of a RtI model. Gersten and Dominio's (2006) research suggests that more large scale studies involving actual classroom teachers being trained in lieu of graduate students, substitute teachers, or retired teachers is needed to provide reliable, describe, and analyze how teachers receive

and perceive training on the implementation and interventions used in the RtI process. Researchers further confirm that the collaboration among all educators involved in the RtI process cannot be overemphasized and should be applied to further research (Hawkins et al., 2008). Research conducted by VanDerHeyden (2005), Burns, Appleton, and Stenhower (2005), and Fuchs et al. (2003) reviewed RtI programs conducted by researchers and schools but suggest that more research is needed to build and support confidence with this process. In addition, studies support the need for research that examines the factors needed for developing and sustaining RtI models (Hughes & Dexter, 2009).

Studies indicate that a paradigm shift is needed at the staff development level (Ardon et al., 2005). Teacher buy-in at different grade levels, play a significant role in the successful implementation and incitation of RtI. Studies of the process stress that RtI is the responsibility of all the educational stakeholders (Gloeckler, 2003). According to Gessler-Werts, Lambert, and Carpenter (2009), a consensus was not found that one source of training is better than another as it relates to supporting and implementing RtI. They encourage teachers' perceptions be explored for the usefulness of training and identification of who should be trained. Further research is also suggested in the literature to examine and give validity to the entire RtI process.

Summary

This literature review explored a number of areas that provide the foundation for this study. While RtI has gained support as a framework that brings about systematic change within public education (Fuchs & Deschler, 2007); questions still loom regarding

the effectiveness of school-wide response to intervention methods. This literature review explores the rationale, policies, models and studies surrounding RtI.

The educational policies and laws reviewed have impacted and lead to the formation of the response to intervention method of instruction. Prominent laws and polices were discussed. Their connection to one another, core characteristics, and how their developments impacted and developed the fundamental core characteristics of RtI was reviewed.

The State of Illinois mandates that all school districts in the state fully implement RtI by the 2010-2011 school year. In this section, the Illinois State Board of Education expectations for its schools are outlined. This section also outlines the philosophy of RtI according to the Illinois State Board of Education.

Next, RtI models, techniques, and studies were discussed. The tiers that are comprised of the RtI conceptual framework were reviewed. The review covers the procedures and expectations expected in each tier. Delivery of services amongst the tiers varies; however, all students are entitled to the services offered in each tier at any one point in time.

The models in which services are rendered within the RtI framework vary. The models reviewed are the treatment protocols that are indicative of the RtI framework. Large scale RtI studies were also reviewed that support the effectiveness of early intervention techniques and the overall tenets of RtI.

The final section highlighted the fidelity of staff development and its impact on the integrity of RtI. The researchers and studies reviewed concluded that staff

development is a key component in the implementation process. One staff development technique was not found to be more prevalent than another. Researchers' analysis in this area concluded that staff development increases the effectiveness of the RtI process. It is hoped that further studies in this area will contribute to effectiveness and sustainability of the RtI.

CHAPTER III

RESEARCH METHODOLOGY

The purpose of this chapter is to describe the design and methodological approach of this study. This study was designed to explore the implementation of the Response to Intervention framework of a Chicagoland suburban school district. This chapter focuses on the methods used for instrument development, data collection, and data analysis.

Introduction

This study analyzed a Chicagoland suburban school district's development and implementation of its three-tier response to intervention (RtI) model by examining staff training and staff perception. Data were collected through staff surveys, interviews, and artifact review.

The phenomenological qualitative case study method was used to conduct the research for this study. Stake (1995) suggests that when conducting a case study researchers should look for the detail of interaction within its context; thereby, indicating that case studies are the particularity and complexity of a single case study coming to understand its activity within important circumstances. Creswell (1994) describes phenomenological studies as the study of lived experiences. Phenomenological case study research allows for data to be collected for the intent of analyzing and interpreting a phenomenon (Creswell, 1994; Porter, 2008). This method allowed for an analysis of the

whole experience encountered by staff as it relates to the districts implementation of their RtI plan and its perceived effectiveness.

Research Design

For the purpose of this study, data were collected for the intent of analyzing staff perceptions of lived experiences that relate to RtI, staff roles in the process, and the perceived impact the provided resources play on the effectiveness of the RtI process within a district. This study examined how these factors contribute to the implementation of a district's RtI plan using the qualitative phenomenological case study approach.

Horn (1998) summarized the usage of phenomenological descriptive studies as an analysis of the wholeness of an experience. Phenomenological descriptive research is designed to develop an understanding of the human need to know, translate, and communicate the development and usage of approaches that sustain an effort. Phenomenological descriptive studies and qualitative research allows researchers to examine the influence and impact contributing factors have on the implementation process; thereby, suggesting that inductive reasoning can be utilized to draw conclusions once data has been gathered (Wilson, 1998).

Qualitative research allows a researcher to seek an understanding as to how participants make meaning of a phenomenon (Merriam, 2002). The use of a qualitative case study methodology will allow a researcher to explore a single entity or phenomenon bounded by time and activity and collect detailed information using a variety of data collection procedures (Merriam, 1998). Yin (2003) suggests that case studies provide comprehensive research strategies to guide the logic of a study, the data collection of a

study, and data analysis procedures. Newman (2008) concludes that the specific focus of a case study makes it a good design for complicated questions, situations, or occurrences that arise from everyday practices; thereby, studies such as this can provide an empirical basis for the generalization of specific factors used in the implementation of an RtI model.

RtI models implemented within school districts draw skepticism due to a lack of research supporting their usefulness and school wide implementation (Fuchs, Deschler, & Reschly, 2004). This research study focuses on the perception of the implementers within the district as it relates to the approaches and trainings utilized to implement RtI. Figure 3 displays the correlation that school personnel's perception has on the implementation of a response to intervention model. Through the usage of a phenomenological descriptive study, this researcher attempted to analyze and detail a district's certified staff's experiences as it relates to trainings, staff roles, and supports provided to implement RtI.

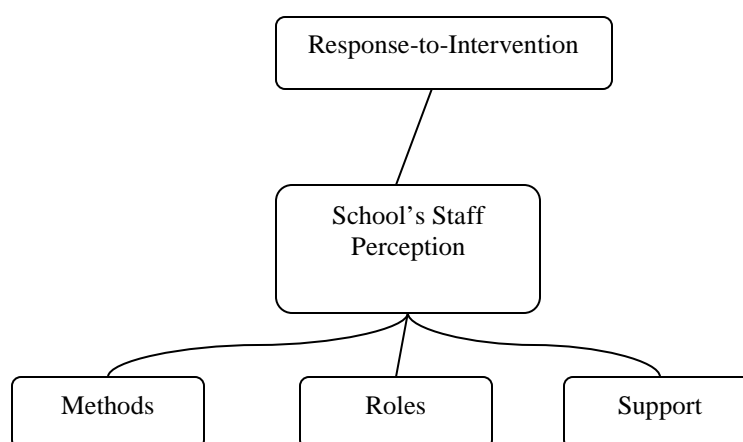


Figure 3. Phenomenological Description

Research Participants

One predominately low income African American suburban Chicagoland pre-K through eighth grade elementary school district was selected for this study. This district was selected in accordance with Ninni's (2010) criteria that suggests that a school being studied for its RtI process should meet the following criteria:

1. Involvement in the RtI process for at least two years
2. Documented RtI building level professional development
3. Implementation of documented building-based problem solving team meetings
4. Usage of a multi-tierd prevention model
5. Usage of data to inform and drive instruction
6. Usage of RtI for the purpose of determining a specific learning disability
7. Usage of scientifically based interventions
8. Evidence of reallocation of resources and time
9. Sustainability of leadership

The district selected for this study meets the suggested criteria as identified.

All certified staff was invited to participate in an internet based survey.

Participation in the survey was done under the auspicious that respondents' involvement would be voluntary and anonymous. This type of participation allows participants to retain control over their participation by allowing them to choose not to answer some or all of the proposed survey questions without feeling pressured (Glesne, 1998).

Table 1

District's Response to Intervention Process Criteria

Involvement in Process: 4 years
Documented building level professional development: 4 years
Building –based problem solving team meetings: Bi-weekly
Multi-tiered prevention model: Documented on Districts web site
Usage of data to drive instruction: Progress monitoring via Aimsweb
Specific learning disability determination: Special Education eligibility paperwork
Usage of scientifically based interventions: Researches curriculum materials
Reallocation of resources and time: Schedule changes and grant allocations
Sustainable leadership: Current administration team in place for last 4 years

Individuals selected to be interviewed were chosen using purposeful sampling. The selected individuals were based upon a targeted sample who agreed to expound on the practices and methods used within the district to implement RtI. This is a favored technique by Gerson and Horowitz (2002). The selected individuals consisted of district administrators and certified staff who were trained and currently implement the districts RtI plan.

Research Instrumentation

The intended purpose of this study was to describe and analyze data detailing the experiences school personnel had while developing their district's RtI plan as it correlates to the model used, their roles in the process, and the supports utilized. This study was also designed to collect and analyze data describing the perception certified staff has towards RtI. Data used to analyze and describe staff perception were gathered through staff surveys, interviews, and a review of artifacts.

Surveys

The questions developed for the survey were based upon the researcher's experiences and the existing literature on RtI (Werts et al., 2009). The questions focused on four categories: decisions affecting implementation, role of the teachers and other personnel, professional development, and student and staff support. This approach in assessing staff's perception of the process and the model has been found to be useful in revealing the current status of a target within a particular entity (Thomas, 2003).

The survey question responses were presented using a likert scale. Jamieson (2004) stated, "Likert scales are commonly used to measure attitude, providing a range of responses to a given question or statement" (p. 1). Participants were asked to respond to questions by indicating whether they Strongly Agree (5), Agree (4), Neutral (3), Disagree (2), or Strongly Disagree (1). There will be five main categories for these statements:

- (1) RtI Implementation
- (2) Staff Role Perceptions
- (3) Training in RtI

(4) Supports

Interviews

Interviews allow researchers the opportunity to learn about things they cannot see, and to explore alternative explanations of what they can see (Glense, 1998). Yin (2003) concludes that interviews are one of the most important sources of information in a case study. They are based upon the assumption that the implementation of the process under inquiry has different meanings in different people's experience (Gubrium & Holstein, 2002).

Semi-structured interviews were utilized. A semi-structured format allows researchers to be guided by questions or issues (Merriam, 1998). This type of format allows participants to provide specific information and provides flexibility during the interview to accommodate the perspective of each participant (Porter, 2008). Brewerton and Millward (2001) noted that semi-structured interviews create environments where the researcher has the advantage of relatively easy analysis accompanied by the flexibility to probe into areas of interest in greater depth. This research aligned semi-structured questions with the central research questions (see Appendix A). This protocol provided a framework for in-depth exploration of a phenomenon (Citro et al., 2003).

Interview questions were based upon the survey results and existing RtI literature. The questions in Appendices A-C are designed around the districts' organizational processes that may have impacted the shaping of their RtI model and staff experiences (DeVault & McCoy, 2002). The questions were formatted using open ended questions.

The usage of open ended questions allows the researcher the opportunity to tap into individuals' experiences (Charmaz, 2002).

Artifacts

The artifacts examined for this study are formal and informal documents used during RtI implementation. The artifacts were examined to gain an understanding and serve as a basis of substantiating information as to how the research participants measure student growth or lack of growth in a particular academic area (Porter, 2008). No identifiable student school-based data will be necessary for this research. The artifacts examined consisted of professional development activities. The artifacts reviewed also consisted of professional development evaluation results, administrative team meeting agendas, school board agendas, staff building level agendas, community correspondences, and student progress monitoring data.

Research Procedures

Qualitative data for this study were collected from administrators, teachers, and school personnel involved in the RtI process. Interviews were conducted to expound on the results generated by the survey. Artifacts examined pertained to the planning and implementation of the RtI process.

Surveys

A questionnaire formatted in Internet based Opinio was distributed to certified staff via e-mail. The multistage distribution process provided by Dillman's (2000) approach to internet-based surveys is the format that was utilized for the survey distribution. The survey was electronically sent to all certified staff through their district

e-mail accounts. Prior to electronically sending the e-mail, all staff received an e-mail introducing the researcher, purpose of the study, participants' confidentiality, and their right to voluntarily participate or not in the study. The following week the survey was electronically sent to participants through a link and a letter stressing the importance of their voluntarily participation in this research.

Interviews

Interviews with district administration, building administration, general education and special education teachers, and related support personnel were conducted three weeks prior to the dissemination of the survey. The interviews were conducted on site in the participants' natural setting. All interviews were scheduled for one hour. The interview questions and participation consent forms were sent to all voluntary participants in advance. The semi-structured interview process followed an open-ended format; however, the questions were formatted to elicit certain information as it relates to the district's RtI process. All interviews were conducted, recorded, and transcribed by the researcher.

Artifacts

Artifacts examined served as another piece of data to support the participants' perception of the district's RtI process. The artifacts provided visual representation of professional development opportunities and supports. The review of the artifacts occurred with district and building level administration. The administration team of this district is responsible for the collection and analysis of staff evaluations after each in-service provided by the district. The results of these evaluations were reviewed by the

researcher and administration. The artifact review occurred after the interviews had been completed. Appendix D displays the guide that was used when reviewing the artifacts.

Data Analysis

Data analysis is the process of making sense out of data by consolidating, reducing, and interpreting what people have said and what the researcher has seen and read (Merriam, 1998). In much qualitative research, analysis begins with the collection of data (Merriam, 1998). The data collected for this study was analyzed and triangulated to ensure a holistic approach to the analyses of the data. The triangulation of the data assisted this researcher at looking to see if the phenomenon remained the same throughout the study (Stake, 1995). The data analysis of this study was based on the structure described by Tesch (1990) which includes four steps: (1) getting a sense of the whole phenomenon being studied, (2) grouping themes, (3) coding themes to identify facilitators and barriers, and (4) identifying and categorizing participants' responses.

Triangulation of data sources was executed to enhance the overall accuracy of this study. Triangulation is the process of collecting data from different individuals, collecting different types of data, and using different methods to collect data (Creswell, 2005). The purpose of triangulation is to examine a single phenomenon from more than one perspective. By collecting data from different individuals, different perceptions and experiences can be conveyed. Comparing evidence obtained from various data collection methods enhances the accuracy and logic when interpreting the information obtained (Stake, 1995). Data collected through different means will allow the researchers to verify processes and contradictions in the process and practices (Porter, 2008). The utilization

of different data collection methods will also allow the researcher to offset the weaknesses of some methods by using the strengths of other methods (Porter, 2008).

The method of open coding was used to develop the concepts and categories for analysis. Open coding involves asking questions and makes comparisons by labeling phenomena within data (Strauss & Corbin, 1990). By opening up data and exploring ideas and meanings in text, significant concepts and remarks can be identified and examined from generated data (Newman, 2008). By using the open coding method, researchers are allowed to discover, name, and describe categories based upon their properties and dimensions (Strauss & Corbin, 1990). Open coding also allows researchers to dissect data in an attempt to identify categories properties, and dimensional locations within the phenomenon (Strauss & Corbin, 1990). The usage of open coding coincides with the steps outlined by Tesh. This method of coding allows researchers to establish themes as it relates to the phenomenon being studied.

Survey responses were analyzed through the utilization of Loyola University's Opinio Survey Software. Through the utilization of this software program, survey results were displayed through percentages. The percentages showed the number of survey respondents per question, and the type of responses received from each question.

For the purpose of this study, triangulation occurred as a result of the data generated from staff interviews, staff surveys, and artifact review. The themes that emerge as a result of the interview responses were compared to the themes that emerge from the survey responses. The artifacts reviewed also provided assistance in documenting the themes that emerged based upon the interviews and the surveys. An

artifact review will increase the validity of the researchers interpretation of the data collected (Stake, 1995). Through triangulation, the findings from these sources presented a reliable picture of the perception and practices of the RtI model being implemented within the district. As triangulation occurred, it was based upon the concepts and categories identified through the usage of the open coding method.

Ethical and Validity Issues

To ensure that the data collected for this study was done in an ethical manner, the researcher followed the steps laid out by the Institutional Review Board rules and regulations. All participants were asked to sign a consent form that provides a description of the nature of the study; its intended purpose and also the understanding that participants can voluntarily withdraw from the study at any time if they chose to. Throughout the data collection process, the researcher gave participants the opportunity to address any concerns they may have during the interview or data collection process. The individuals participating in the interviews and their responses were not revealed to anyone other than the researcher. The specific names of individuals and the actual school were not provided in this research document.

Summary

This chapter is divided into six main sections that outline the techniques and approaches that were utilized to draw inferences relating to staff's perception of RtI. The initial sections introduce the research design. The following sections describe the research participants, instrumentation, procedures, and data analysis process. The final section focuses on ethical and validity issues.

The primary focus of this chapter explains the methodology utilized throughout the study. The phenomenological qualitative case study methodology is the method the researcher used to gather data to describe staff's perception of the current RtI model utilized by the participating district. Data outlining the experiences and the impact those experiences had and have on the district's RtI model were generated through the research instrumentations used in this study.

Data for this study were gathered through the use of purposeful sampling interviews, artifact reviews, and dissemination of a survey via e-mail to all certified district staff. Upon the completion of gathering data, the data generated was coded and triangulated. Coding and triangulation of data was used to identify themes that were used to answer the research questions posed by this study.

The question posed by this study and the research instrumentation process were subjected to review by the Instructional Review Board. The guidelines and procedures outlined by the review board were implemented to ensure that the confidentiality of all research participants were maintained.

CHAPTER IV
DATA ANALYSIS

Introduction

Federal mandates such as NCLB and IDEA require schools to monitor student progress based upon their response to intervention. The State of Illinois mandated that by the 2010-2011 school year all school districts were to have RtI plans in place. The obligatory plans allot for school wide collaboration and high quality student instruction that is monitored for student growth. This chapter analyzes data gathered to examine one district's certified staff's perception of their training and implementation of its RtI plan.

This study explored certified staff's perceptions through the usage of a phenomenological qualitative case study. This method was used for the purpose of analyzing and interpreting lived experiences of certified staff members who were trained and currently implement the district's RtI plan. Their experiences were analyzed and interpreted to describe the phenomenon studied. The analyzed data gathered was used to identify themes, facilitators, and barriers.

Training and implementation of the district's RtI plan was explored by surveying certified staff members, interviews, and reviewing artifacts. All certified staff was invited to participate in the survey. Through the use of purposeful sampling, selected staff members were interviewed. The interviewed staff members provided clarity to the perceived amount and sufficiency of the RtI training provided by the district to support its

RtI plan. The data that was collected and coded examined the pertinent themes that emerged.

Chapter IV begins with a review of the research questions, documentation of the implementation of the data collection process, data coding and analysis, analysis of the thematic categories revealed through the analysis process, interpretation of the data, and summary of the findings. This chapter concludes with a summation of the district's certified staff's perception of RtI.

Research Questions

The research questions delineated the purpose of the study. The following research questions were designed to examine certified school staffs' perception of the training and implementation of the district's RtI plan:

1. How were certified staff trained to implement RtI as indicated by a review of district's documents?
2. What is certified staffs' perception of the RtI process within the district?

Data Collection

An e-mail was sent to all certified staff inviting them to participate in a RtI perception survey created through Opinio (see Appendix E). The invitation was extended to all certified staff through the use of the district's web server. Certified staff was given a week to voluntarily participate in the survey. A reminder e-mail was sent to staff a week later extending another invitation to participate in the survey (see Appendix G). Upon certified staff's completion of the survey, results were generated through Opinio.

Due to time constraints, interviews were conducted prior to the dissemination of the electronic survey to all certified staff members. Interview participants were selected based upon their training and direct knowledge of the implementing process of the district's RtI plan. Informed consent was obtained prior to all interviews. Loyola's Internal Review Board approved measures were taken to protect individual confidentiality and anonymity as outlined in the Consent to Participate in research form (see Appendix F) and the letter recruiting participation in the interview process (see Appendix H).

The artifact review was implemented as outlined in Chapter III. The artifact review results were categorized and used to support the themes generated through the interview and survey process. The artifact review was also done to obtain data relating to staff training and resources purchased to support the district's RtI plan.

Interpretation of the Data

The primary objective of the content analyzed for this study was to determine staff perception of the implementation and development of the district's RtI process. Survey questions were formulated to ascertain certified staff's perception of their knowledge and understanding of the response to intervention framework, training they received to implement the process, supports used to sustain RtI, fidelity of RtI within the district, and individual roles within the process. Interview questions were based upon the same premise as the survey questions. Interview questions were also design to ascertain further insight into educators' perceptions, implementation processes, and RtI trainings

within the district. Responses were grouped by themes and defined by specific responses to ensure coding accuracy.

The survey yielded 29 respondents which equated to 46% of the districts 63 certified staff employees that choose to participate in the on-line survey. Table 2 displays the job positions of the certified staff that participated in the survey.

Table 2

Job Descriptions

	Absolute Frequency	Relative Frequency
Administrator	5	17.24%
General Education Teacher	15	51.72%
Special Education Teacher	3	10.34%
Certified Support Staff	4	13.79%
Not answered:	2	6.90%

The average educator within the district is reported to have 12 years of experience. Statistical data that would allow for a comparison between survey respondents and non-responders was not made available to this researcher. As a result, the demographics listed are based solely on the information provided by survey respondents. Subsequently, the greatest number of survey participants (41%) reported that they had between 7-14 years of experience in the field of education. Educators having 2-6 years of experience (11%) participated least in the on-line survey. Certified staff reporting to have been in their current teaching positions between 7-14 years,

accounts for 63% of the survey respondents. Those that reported they have been in their current position between 2-6 years made up 30% of the survey respondents, and 7% of the respondents noted that they have been in their current position between 15-19 years.

Early childhood instructors made up 3% of the survey respondents, 57% of the survey respondents reported that they taught at the elementary level, 30% reportedly taught at the junior high level, and the remaining 10% instructed students throughout the entire district. Despite the low percentage of respondents in the early childhood category, 50% of the early childhood certified teaching staff participated in the survey. Across the district there is a rival amount of certified staff in each building despite the high number of respondents at the elementary level verses the limited amount of respondents at the junior high level. In addition, certified staff members who provide district wide instruction had a low participation rate in relationship to the number of certified staff who render those type of services.

Research question 1 sought to ascertain information as to how certified staff was trained to implement RtI. This question was answered by reviewing and analyzing the district's artifacts relating to RtI. The artifacts revealed that district administration met on several occasions to develop their understanding of the RtI framework. Subsequent administration meetings focused on developing the district's RtI plan and staff development. The artifacts also revealed that staff was in-serviced on the tenets of RtI and how they were to be implemented throughout the district. These in-services occurred within individual buildings, district wide, locally supported workshops, and regional

conferences. In addition, the district developed literature for community distribution and board polices to support their RtI framework.

Table 3 provides a visual representation of the number and type of trainings that have occurred thus far.

Table 3

Response to Intervention Trainings

Type of RtI In-Service	# of Meetings	Purpose Of Meeting
District Wide In-Service	4	Introduction of RtI & District Plan
Local Meetings	7	Introduction to RtI, Assessments, Progress Monitoring, Connection to Special Education, Curriculum, Interventions
Regional Meetings	6	Introduction to RtI, Assessments, Progress Monitoring, Connection to Special Education, Interventions, Staff Development
National Meetings	2	Differentiated Instruction & Interventions
Building Level Meetings	28	Curriculum. Differentiated Instruction, Assessments, Interventions, Implementation of District RtI plan
Administration Meetings	20	RtI Framework, District RtI plan, Interventions, Staff Development, Assessments
Parent Communication	3	District Website, Family Institute Night, Board Policy, Pamphlets

Survey and interview responses resulted in the development of thematic categories. Coding of the data produced five themes. Themes 1 and 2 relate to staff's perception of the RtI training they received. Theme 1 describes the understanding certified staff has of RtI and the district's process. Theme 2 addresses staff perception of the type and sufficiency of the training.

Themes 3-5 address certified staff's overall perception of RtI. Theme 3 attempts to characterize the supports staff has received as it relates to materials used and personnel. Themes 4 and 5 categorize the fidelity of RtI's implementation within the district and the staff's perception of their roles.

Understanding of Response to Intervention and the District's Process

Theme 1: Administrators and certified staff perceive themselves as having a solid understanding of the purpose of RtI. Interview participant 6 expressed, "The workshops we have participated in gave us an understanding of the rationale behind RtI." The majority of the survey respondents (79%), agreed with interview participant 6 in lieu of the 10% who were neutral in their responses and the 3.45% of survey respondents who believe the district did not do enough to ensure that certified staff understood RtI's core principles.

Interview participants felt that administrators and certified staff were able to articulate the district's RtI plan; however, their understanding of its implementation varies. Interview participant 7 noted, "My grade level team and I feel we have an understanding of the purpose of RtI, but not a true understanding of how to implement it."

When asked what the purpose of RtI was, interviewed certified staff commonly responded that it is a way of looking at students to identify “who needs what” in order to achieve. Interview participant 3 stated, “RtI is a method that is needed and used in an attempt to remediate students prior to referring them for special education services.” This participant went on to state that within this district, it has taken time and training for the staff as a whole to understand that RtI is not a new special education referral method. Participant 3 further noted, “The concept of RtI is not new. It is a different way to reach students before putting a label on them.” This view was shared by all the interviewees. They appeared to understand that student deficits have to be identified and interventions tried and monitored prior to referring a student for special education testing. Furthermore, they stressed the importance of understanding that RtI is not a special education initiative but rather a general education initiative that is used to identify student academic abilities. Interview participant 5 shared that belief; however, indicated that RtI if utilized correctly should diminish low test scores and the number of students struggling to achieve at or near grade level.

Administrators viewed RtI as a general education initiative that required them to look at the effectiveness of their curriculums. One administrator described RtI as a version of differentiated instruction that encompasses a monitoring component. It was their belief that through the use of progress monitoring and curriculum analysis, student progress should be observable and measurable. Interview participant 2 noted, “Staff understands what the definition of RtI is and what is expected of them, but without proper

documentation of student progress to validate success, some view it as a waste of time.”

This opinion was the resonating point of view shared by the administrators interviewed.

The implementation of the district’s RtI plan varied between certified staff and administrators. Both parties described the usage of a team approach to identify the interventions used to assist struggling students; however, how the services are to be implemented and by whom vary. In addition, who is responsible for monitoring students responses to the selected interventions vary. Interview participant 7 stated, “Depending on the grade level and in some cases the particular teacher, there can be confusion as to who is responsible for monitoring student progress.” This participant reassured the interviewer that this happens occasionally despite educators within the district knowing what their expected responsibilities are. Surveyed respondents were evenly split on their perception of the district’s ability to ensure that all stakeholders have a clear understanding of its RtI procedures. Thirty-four percent of the surveyed participants agreed that the district’s RtI procedures are understood by the stakeholders, 28% were neutral, and 31% felt that the district’s procedures were not understood by its stakeholders.

Administrators interviewed were concerned about adding extra work to resource teachers’ caseloads; as a result, they viewed the monitoring and implementation of the selected interventions as the primary responsibility of the classroom teacher. An interviewed administrator indicated, “Staff burn-out is a concern.” The administrator went on to say:

The dissemination of the additional workload needs to be done so fairly so that one group of individuals do not feel or are perceived as doing the work of others. This perception can easily happen because certain teachers do not have a set roster of students they are responsible for.

Certified staff interviewed viewed resource teachers (reading specialist and social workers) as the individuals who should be responsible for implementing and progress monitoring interventions put into place by the district/school based RtI teams. It was stated:

While it is understood that all have a hand in the implementation process, those without a classroom of students to instruct on a daily basis have more flexibility in their schedules. As a result, in some instances they should be held accountable if not to implement interventions but to at least progress monitor them.

Those instances were not clearly identified by the interviewee; however, it was clear that they understood the district's RtI plan and the expectations the district has of its teachers.

Table 4 shows the results of the certified staff survey.

Table 4

Survey Responses

Choices:	Strongly Agree		Agree		Neutral		Strongly Disagree		Disagree		Not Answered	
	(N)	(%)	(N)	(%)	(N)	(%)	(N)	(%)	(N)	(%)	(N)	(%)
Staff understands RtI:	7	24.14	6	55.17	3	10.34	1	3.45	-	-	2	6.90
RtI procedures are understood:	1	3.45	9	31.03	8	27.59	2	6.90	7	24.15	2	6.90
Training was sufficient to sustain the RtI process:	2	6.90	9	31.03	12	41.38	2	6.90	2	6.90	2	6.90
Adequate RtI building support exists:	4	13.79	5	17.24	11	37.93	2	6.90	5	17.24	2	6.90
Staff selected the interventions:	3	10.34	4	13.79	5	17.24	4	13.79	11	37.93	2	6.90
Adequate movement between tiers:	1	3.45	8	27.59	15	51.72	-	-	3	10.34	2	6.90
Interventions support student intervention plans:	3	10.34	13	44.83	8	27.59	1	3.45	2	6.90	2	6.90
Appropriate monitoring exists:	3	10.34	6	20.69	15	51.72	2	6.90	1	3.45	2	6.90
Staff trained to modify interventions:	3	10.34	5	17.24	6	20.69	6	20.69	7	24.14	2	6.90
I participate in the RtI problem solving team meetings:	3	10.34	11	37.93	1	3.45	3	10.34	6	20.69	5	17.24

Survey results and interviewees concur, that on the average certified staff understands the core principles of RtI and the district's procedures. It has been reported that the trainings that have taken place have assisted staff in their understanding of the implementation process; however, all do not agree on how student progress should be monitored and suggest additional training in this area is needed.

Staff's Perception of the Type of Training Received

Theme 2: It is believed that additional training is needed and should be ongoing. Both administrators and certified staff members believe that the initial training received was sufficient to begin the change process. Interviewees suggested that subsequent trainings will further staff's understanding of the process and assist the district in developing and improving its RtI plan.

The majority of the staff that participated in the survey (41%) remained neutral regarding the sufficiency of RtI training as it relates to sustaining their role in the process. Thirty-eight percent of the survey staff felt they had received sufficient training to sustain their role in the process, while 13% of the survey staff believed additional training was needed in order for them to sustain their role in the process. Surveyed respondents commented that trainings had been provided; however, additional trainings were needed and should be on-going. "The trainings began the paradigm shift that was needed for veteran teachers" Interview participant 8 concluded. Additional interview participants and survey respondents commented that more in-services were indeed needed .since the initially trainings. It was suggested that the initial trainings provided basic information, but additional in-services can be used to further assist with facilitating the process beyond

its initial premise. In addition, it is believed that those who actively participate in the process possess a better understanding than those who do not. Interview participant 8 stated:

Those who are actively engaged in providing tiered interventions, progress monitoring, and data collection understand the districts process, and the workshops provided make more sense to them when compared to those who are not active in the process.

Interview participant 8 went on to say:

This is not to say that the trainings are and were not beneficial. Just like anything else, practice makes perfect. With practice, good questions and scenarios come up that can only make our plan better for all the stakeholders: teachers, students, and parents.

The artifacts reviewed showed that certified staff were provided with in and out of district trainings. The trainings were designed to provide staff with an understanding of the concept and framework of RtI. The trainings also focused on interventions that could be utilized to support students in the area of special education identification, reading, and behavioral supports.

All staff interviewed agreed that the initial trainings provided by the district assisted in staff “buy-in” of the response to intervention initiative. The trainings also assisted staff in developing a plan to identify students in need of extra support, the type of support needed, how to progress monitor, and identified the steps that should be taken to include parents within the process. Interview participant 1 referred to the trainings as

laborious but necessary to effectively plan for RtI success. Additional interviewed staff agreed that the initial trainings were helpful. They further commented that on going trainings would be beneficial in assisting both new and returning staff. The additional trainings suggested by several interviewees and some survey respondents were: refresher and additional training in differentiated instruction, examples of how to implement the process, and how to gather and interpret data more efficiently.

Personnel and Material Received to Support Response to Intervention

Theme 3: The district currently employs sufficient personnel to implement their current RtI plan. The material used to support RtI is evolving.

When asked if there was adequate building staff to support RtI, the majority of the staff surveyed remained neutral, 31% agreed, and 25% disagreed. Survey respondents expressed in the comment section that at the elementary level, there appears to be sufficient personnel to support the district's RtI process; however, at the junior high level implementation of the process varies based upon the availability of staff. Interview participant 9 states, "Self-contained classrooms at elementary buildings allow for easier pull-out times to assist a struggling student verses the same type of student at the junior high who changes classes and teachers every 50 minutes." This participant went on to explain that by students having to change classes and teachers so often, the flexibility in providing additional intensive support for struggling students is challenging. Interview participant 9 went on to say, "Students' are required to be exposed to the same materials as their non-struggling peers, and staff schedules make the rendering of intensive direct RtI services at the junior high complicated." Interviewee 10 added that staff is available

at the junior high; however, scheduling from the onset of school year is critical for the development and implementation of a successful and meaningful RtI in that type of learning environment.

The majority of the staff interviewed believed that the district employed sufficient staff to effectively implement the district's RtI plan; however, its implementation requires a paradigm shift and 100% teacher and administration "buy-in." Interview participant 4, indicates:

When administrators are encouraging, supportive, and proactive, teachers will put forth more effort despite any foreseen or unforeseen obstacles.

Given the change of instructional techniques required to successfully facilitate RtI, administrators possessing a zeal and a commitment to this initiative will either make or break a staff's morale and commitment to the process.

In addition, one teacher expressed that there was not enough certified staff members to properly execute the district's RtI plan. Consequently, it was noted that additional personnel support would be welcomed.

The material used to implement the RtI across the district varied. The overwhelming answer to what materials are being used to implement RtI was whatever is available. Interview participant 1 expressed, "Because the initial introduction of RtI to district was viewed as a reading initiative, the reading specialists were primarily the sole individuals selecting interventions to be used, and when they were to be used." They went on to explain that this happened because reading specialist were the primary

individuals responsible for implementing the interventions and monitoring student progress.

There was consistency throughout the district as to specifically what materials and interventions were being used per grade level; however, there was no comprehensive list cataloging the resources available to teachers. Fifty-two percent of the survey respondents indicated that they had no involvement in the identification and selection of interventions to be utilized within each tier; while only 24% responded that they had involvement in this process. Interview participant 5 stated:

As the district grew and grows, the selection of interventions by a wide range of educators throughout the district grows and grew. While there are set material and techniques to be used for interventions, as new material becomes available and staff trainings continue to evolve, so does the interventions to be used.

As a whole, those interviewed supported interview participant 5's response and further noted that the selected committee designated to identify and purchase interventions is currently compromised of administrators and selected certified staff.

Fidelity Within the Response to Intervention Implementation Process

Theme 4: Administration and staff concur that fidelity varies between the junior high and elementary schools. As the district continues to evolve, the methods used and staff confidence grows. As a result, it is believed that the fidelity in which the interventions are rendered will rise.

It was stated that the district allows the data “to tell” the story. It is perceived by those interviewed that if the interventions are implemented with fidelity and integrity, it will show in the progress made by students. Walk throughs, fidelity checklists, and lesson plans reviews are common methods utilized throughout the district to check for fidelity. Interview participant 5 believes that over time educators have gotten better identifying and utilizing the appropriate interventions to support identified student deficits. It was also noted by this interviewee that fidelity and integrity is evident by educators’ dedication to the implementation and data collection for the purpose of progress monitoring. Interview participant 2 expressed the following:

The current means administrators use to monitor for compliance, fidelity, and integrity of RtI throughout the district, allots for identification of weakness, strengths, and global areas of improvements. It also allows administrator to identify weakness within the general curriculum and be allots for more proactive decision making within their respective buildings.

This researcher’s observations found that the junior high appears to struggle with the implementation of interventions with fidelity. Interview participant 9’s remarks supported that observation when they concluded:

Junior highs struggle with fidelity because they cram interventions down students’ throats. This is done not as a result of educators attempting to be noncompliant, it is done because it appears middle school teachers have a difficult time with the mindset of providing differentiated instruction

across all areas despite the classroom setting where the interventions are to take place in. In other words, they modify assignments to a degree that is not always conducive to providing the appropriate amount of support a student may require to gain or maintain progress.

Others surmised that fidelity occurs in all areas of implementation; however, the tenacity in which it is carried out with can be misconstrued as questionable at times.

Interview participant 8 surmises, “The collection of data is critical to the fidelity of RtI. It is the data that is used to assess student growth and to determine the path of instruction used.” Interview participant 4 supported the remarks made by Interview participant 8 but indicated:

The length of time that each intervention is used differs per student and per teacher. The transition from one tier to another also varies depending on who is chairing that particular students RtI meeting and what school and grade the student is in.

When asked why there appears to be a difference in the length of time between each tier and when an intervention should be switched, it was noted that different people believe that more time and effort may be needed by the child, teacher, or increased commitment and follow through from the student’s home may be required before growth can begin to be seen. In all, the data concludes that 52% of the surveyed staff is undecided about the appropriateness of the length of time students spend within each tier, while 55% of the surveyed staff agrees that the data is a determining factor regarding the type and appropriateness of the interventions used. In addition, 52% of the surveyed staff

was undecided about the adequateness of the monitoring techniques used to assess students' responses to the implemented interventions. As a result, this area is viewed as an area where further growth and development is recommended.

Staff Roles

Theme 5: As staff retires and new staff is hired, certified staff perceives that the roles of existing staff members evolve. Administration perceives that the roles of all have remained consistent with few variations.

As a consensus, certified staff interviewed indicated that they either currently or previously were part of the district's RtI team; 48% of the survey respondents agreed with them, while 31% of them did not. Interview participant 10 stated:

The individuals on the RtI team change from year to year in an attempt to give all exposure to the process. General education teachers are only involved if they have a student in Tier 1 or Tier 2. Special education teachers and support staff rotate amongst the team, while key staff members i.e., reading specialist, speech pathologist, social workers remain constant if a particular building only has one such staff member.

When asked what takes place in a RtI team meeting, it was noted that teachers identify students within their classrooms who require academic and or social emotional interventions beyond what is provided within the norms of the classroom. Once the student and their needs have been identified, the RtI team identifies additional interventions to address the noted deficits, interprets the data generated from progress monitoring, delineates who will and how often progress monitoring will occur, and

communicates student progress with their parents. In addition, it was reported that the team is always comprised of general and special education teachers, resource personnel, and an administrator. Interview participant 10 believes that RtI teams are similar to teacher assistant teams previously established in the district. This interview participant stated, “RtI teams are a welcomed support to teachers who would otherwise be trying interventions without collecting data to support their effectiveness or lack of.”

Survey respondents reported in the comment section that those who actively participate in the monitoring of student progress tend to be better trained on how to modify and implement interventions. It is believed that staff roles are impacted by the addition of new staff members to the district and that when new staff is hired deficits in programming arise. As a result, the implementation of the interventions is sometimes compromised. Interview participant 6 supported the respondents’ claims when they stated the following:

The greatest transitions happen when new staff joins the district. They often come with different understanding, knowledge, and skills that are not always commensurate with the district employees. Consequently, staff roles change from being implementers to trainers and the integrity and fidelity of RtI at that moment is compromised.

Depending on the grade level and building, staff concurred that their primary job is to implement and monitor student progress. Interview Participant 3 expressed, “Staff knows what is expected of them in this process and for the most part are confident in their abilities.” Interview participant 4 further expressed, “Given the change of

instructional techniques required to successfully facilitate RtI, administrators possessing a zeal and a commitment to this initiative will either make or break a staff's morale and commitment to the process.”

Variations in their roles occur when a staff member moves from an elementary to a junior high teaching position. Interview participant 1 remarks, “When a teacher changes schools or grade level, expectations remain the same, however; their role in the process may change.” Teachers interviewed explained that the change that can occur when a teacher moves between buildings and or grade level can be as small as being the sole interventionist and progress monitor or as drastic as being removed from the process in its entirety.

Administrators indicated that the biggest change they see in individual roles within the implementation of RtI is staff “buy-in.” It was further noted that administrators did not identify any significant changes that occur throughout the district beyond who oversees the implementation of RtI within each building.

Summary of Findings

Data generated by this study yielded findings that were grouped into 5 themes. The thematic findings were utilized to ascertain staff's perception of RtI. Their perceptions were based upon the type of RtI trainings received, and staff's understanding and implementation of RtI and the district's framework.

The conclusions reported were based upon certified staff responses. Analysis of the findings concluded that certified staff displayed an understanding of the purpose and framework of RtI. The artifact reviewed supported the claims that the district had

provided training to staff in an effort to assist them in understanding the RtI process and facilitating a staff “buy in.” The trainings occurred over the course of five school years. Initially, the trainings were held to introduce the purpose and the framework of RtI and then evolved into in-services that addressed interventions, curriculum mapping, and the development and implementation of the district’s RtI plan. Currently the district is implementing RtI in all areas of academic and social emotional development. Now that RtI is being fully implemented district wide, data collected suggested that there is a need for additional RtI training with a focus on gathering and interpreting data, differentiated instruction, additional scientifically-based interventions, progress monitoring, and understanding the paradigm shift in education that coincides with the response to intervention mandate. Data also supported that the in-services provided by the district assisted staff in their ability to monitor student progress through the collection of data.

As staff begins to fully embrace the implementation of RtI, staff roles and resources require clarity. Certified staff understands that once an intervention is put into place it has to be monitored for effectiveness, but in some instances it is not clear by whom. It is suggested that administrators provide staff with clarity as it relates to who is going to monitor the data and what interventions are readily available to assist struggling students.

Currently, teachers utilize whatever resources are available. Reading and social emotional interventions are readily identified and available; however, staff struggles with providing research based math interventions to students. The reading specialists are deemed the experts when selecting, implementing, and monitoring interventions for

students requiring additional support in reading despite the fact that reading interventions differ district wide.

Administrators in this district rely on the expertise of their staff as it relates to the selection of interventions and facilitation of the implementation process. They are confident that their staff will do “what’s best for students.” Fortunately, they understand that the district’s plan and the implementation process is providing all with learning and growing opportunities with areas of growth and development identified on a daily bases. Furthermore, it is also understood that staff roles may vary depending on staff changes and “buy-in”; however, it was stressed that through collegial participation all will rise to the task that has been presented to them.

Fidelity of the implementation of the district’s RtI plan is an area that continues to evolve as the district and its staff began to feel more secure in its execution. Certified staff surmised that the fidelity of the RtI process is impacted by the amount of “buy-in” staff has towards the process. Methods used to check for fidelity have been identified as classroom lesson plans reviews, administrators classroom walk throughs, fidelity checklists, and teachers are asked to self reflect on their implementation of the process as means of checking for fidelity.

Educator’s Perception of Response to Intervention

The ideology behind the response to intervention framework is understood by certified staff members. They perceive it as a general education initiative that lacks adequate federal or state funding needed to support its implementation. Staff commonly indicated that teachers’ perception of RtI depended greatly on the amount and type

support and perceived “buy-in” from both building and district level administration.

While staff understands that RtI is a mandated initiative, their commitment to the process as outlined by the district varied. In a building where it was believed that administration fully understood and supports the process, staff believed that they had more input in how the process is implemented and their “buy-in” was perceived to be greater. In a building where staff perceived that administration was just following protocol, little effort beyond following the basic practices and procedures outlined by the district was done.

The RtI framework supported by the district is believed to be a structure put into place that if implemented correctly will assist students in meeting grade level expectations, provide appropriate interventions to address identified deficit areas, and keep students from being over identified for special education services. Administrators and certified staff agree that the usage of differentiated instruction is the key to any districts’ successful implementation of a RtI plan. It is also perceived the RtI will generate “real” answers for the problems that students encounter academically, socially, and emotionally. It is surmised that staff believed that using student-based data to determine intervention effectiveness is more accurate than using only teacher based judgments. Furthermore, RtI is perceived to be an effective identification tool that when used effectively identifies and provides appropriate supports.

CHAPTER V

CONCLUSIONS AND RECOMMENDATIONS

The purpose of this study was to analyze a school district's certified staff's perception and training of its Response to Intervention model (RtI). Chapter V begins with a review of the educational policies and laws that shape the current Response to Intervention initiative, an overview of the study, interpretations, recommendations, and conclusions generated from this study. In addition, Chapter V provides a connection between the literature review and the themes presented.

Introduction

The No Child Left Behind Act of 2001 and the Individuals with Disabilities Education Improvement Act of 2004 proposed that states and local educational agencies provide high quality scientifically-based instruction and interventions, while being held accountable for student progress (Klotz & Canter, 2006). The premises of these two acts were outlined in The President's Commission on Excellence in Special Education Report. This report emphasized the benefit of all students having highly qualified teachers, scientifically based practices, universal screenings, and progress monitoring. These two acts in conjunction with The President's Commission on Excellence in Special Education Report, required general education and special education teachers to provide high expectations and standards to all students while raising the awareness of discrepancies in

academic performance amongst students (International Reading Association, 2010; Stollar et al., 2006).

The complexity of the implementation of RtI is comprised of many components (Newsome-Jacobs, 2008). These components are impacted by the variables required to facilitate an RtI plan with fidelity. These variables if not implemented correctly generate the risk of creating frustrated educators (Barnes & Harlacher, 2008). In spite of a growing number of studies designed to investigate the effectiveness and implementation of various RtI models, researchers describe a need for additional studies to further assess the variables needed to implement RtI with fidelity and integrity (Berkeley et al., 2009; Gessler et al., 2009; Hughes & Dexter, 2009; Hollenbeck, 2007; Newsome-Jacobs, 2008).

Overview of the Study

This study analyzed the structure, roles, resources, and trainings that impacted and aided in the implementation of RtI within a Chicagoland suburban school district. The data gathered is used to draw conclusions by reviewing artifacts, interviewing, and surveying certified staff members of a school that has been implementing RtI for four years. RtI's success within the district was measured by a decrease in the number of special education referrals found over time and improved state test scores. The studied school also measured its RtI success by staff "buy-in" and the fidelity of implementation observed by administrators.

Two overarching research questions were utilized to ascertain the perception of certified staff toward the professional development provided by the district to prepare

them to implement RtI. The data gathered yielded 5 themes. These themes provided a synopsis of certified staff's perception of their training to implement RtI.

Limitations and Delimitations

Limitations to this study involved the potential bias that the researcher may have brought into the analysis process. The researcher is a special education administrator in another district and is involved in the RtI process within that district. To ensure the elimination of personal bias, this researcher recorded all interviews, generated certified staff's input through an anonymous internet based survey, and reviewed artifacts supporting the studied district's RtI trainings and supports under the supervision of a district level administrator.

Due to time constraints, this study was subject to delimitations. The overall sample population where this study was conducted was limited to one school district. The interview participant sample was limited to 10 individuals. The individuals selected to participate in the interview process, have actively participated in the district's RtI process for over two years. In addition, the interview process occurred prior to the dissemination of the survey to all certified staff. Conducting the interviews prior to distributing the surveys is not believed to have impacted the results of this study nor the questions posed to the interviewees. Lastly, the results generated by this study may not reflect the needs or ideology of other school districts and their staff.

Findings and Interpretations

Chapter V offers an analysis of the collected data. The analysis of the data collected resulted in the identification of five themes. The themes provided insight into the structure, roles, resources, and RtI trainings within the district. In addition, the themes addressed the research questions of the study. The findings are discussed as they relate to the literature reviewed in Chapter II. The interpretations of the findings are based upon the perception of certified staff members who participated in the study.

Understanding of Response to Intervention and the District's Process

The finding from this study concluded that both administrators and certified staff understand the core concepts of RtI. Both administrators and certified staff were able to articulate that RtI is a multi-tiered system developed to provide multiple levels of intensity of instruction to students who have been identified as having deficits in a specific area of instruction. They were also able to articulate that this intervention model does not replace special education testing, and the utilization of this system no longer allows a student to “wait-to-fail” before they receive specific interventions to address their deficits. These findings coincide with those found in research conducted by Batsche et al. (2005), Brown-Chidsey and Steege (2005), and Hawkins et al. (2008). In addition, certified staff understood that RtI's framework is based upon a tiered system that is infused with varying degrees of intervention implementation which coincides with the framework that the State of Illinois established for school systems. They further understood that the implementation of RtI and its concepts require a paradigm shift.

As it relates to understanding how the district implements RtI, certified staff

understood the procedures outlined by the district but disagreed amongst themselves as to who should monitor student progress. Research by Ninni (2010) and VanDerhayden and Witt (2005) refer to the utilization of teacher assistant teams to determine the interventions to be used, the length of duration of the proposed interventions, and the identification of who should progress monitor the interventions. Research by Kovaleski and Glew (2006) implied that teams of this nature are viewed as an integral part of the response to intervention problem-solving method. This technique is utilized within this district and is referred to as the response to intervention team. The purpose of this team and the district's philosophy regarding RtI can be found in board minutes, the district's web site, RtI pamphlets, and was the primary topic at RtI trainings that occurred throughout the district. In addition, this district's RtI team's core premise is to define students' educational problems, analyze what is happening within the classroom that could possibly be hindering a student, select interventions to support the identified deficits, and determine how often and by whom should monitor student progress.

Staff's Perception of the Type of Training Received

Studies conducted by Fuchs and Fuchs (2006; 2001) found that successful implementation of RtI depends on the quality of professional development provided. Administrators and certified staff members in this district indicated that training and time is needed to ensure that all are exposed to high quality instruction, and for RtI to be implemented with integrity. A study completed by Spectrum K-12 School solutions, CASE, AASA, NASDSE, and State Title 1 Directors (2009) agreed with this district's staff and suggested that insufficient teacher training can be an obstacle for successful

implementation and staff "buy-in" of RtI. Overall, the staff that participated in this study did not agree or disagree that the type or amount of training they received to support or understand RtI was sufficient. They did however agree that the initial trainings assisted staff in buying into the RtI concept and framework. As a result, they deemed that the initial trainings were beneficial.

Despite the initial trainings being found to be beneficial, additional trainings were noted as less beneficial. Staff expressed that the additional trainings only benefited staff members who participated in the response to intervention team process consistently. Subsequently, staff members who seldom participate in the RtI process appeared to have little understanding of how to implement the process despite having an understanding of the purpose of RtI.

Literature suggests that professional development should focus on RtI beliefs, attitudes, knowledge, and skills in order to be successful (Hollenbeck, 2007; Samuels, 2008). These findings are consistent with certified staff's suggestions that further and on-going trainings be conducted to assist in developing skills in the areas of progress monitoring, data collection, differentiated instruction, data interpretation, and implementation of the process. Research stresses that the obstacles districts face in regards to staff training, progress monitoring, and implementation of RtI are impacted by the amount of staff "buy-in" (Samuels, 2008; Spectrum K-12 School Solutions, CASE, AASA, NASDSE, and State Title 1 Directors, 2009). Gessler-Werts, Lambert, and Carpenter (2009) emphasize that staff's perceptions should be used to determine the needs and type of continued professional development.

Personnel and Material Used to Support Response to Intervention

Staff “buy-in” was found to play an active part in the perception of the district’s ability to provide sufficient personnel and materials to support its RtI plan. In a study conducted by Gloeckler (2003), it was noted that teacher “buy-in” at different grade levels impact the development and implementation of RtI. This study’s findings support that claim.

At the elementary level, it was found that staff believed there was sufficient personnel and material to support RtI. The junior high reported that the implementation of the process varied. The variation in the implementation process was viewed to be impacted by both teachers and students scheduling conflicts and administration “buy-in.” One junior high teacher indicated, “Given the time restraints we work within, when are students suppose to receive the additional supports?” Overall, the findings indicated that certified staff who were interviewed and took part in the survey believed that the district employed sufficient staff to implement RtI, but cautioned that the utilization of staff in an efficient manner is critical to the implementation process.

Vanderheyden et al. (2005) research suggests that supports are needed for RtI to be effective. This researcher found that materials used to support RtI within the studied district were described as both lacking and developing. Berkeley et al. (2009) suggest that a lack of specificity in the selection of research based intervention is a concern. Certified staff expressed that initially the district selected particular individuals to earmark the techniques and materials to be used as interventions. As RtI develops within the district and more staff becomes comfortable implementing the process, additional

resources for purchase and implementation have been suggested and implemented.

Research conducted by the Council of Administrators of Special Education confirms that districts are rapidly adopting and formulating interventions designed to drive student achievement.

Fidelity Within the Response to Intervention Implementation Process

Research conducted by Newman-Jacobs (2008) found that in order for schools to ensure and maintain high fidelity, instruction has to be research-based, systematic, intentional, explicit, robust, and delivered as designed. Administrators and certified staff interviewed and surveyed in this study concurred with Newman-Jacobs findings and indicated that at the elementary level fidelity is observable; however, fidelity at the junior high is deemed questionable.

This district believes that the fidelity and integrity of the district's RtI program can be measured by the data derived from the interventions implemented. Administrators utilize the following methods to observe and monitor the fidelity of the implementation process: walk throughs, fidelity checklists, and lesson plans review. This researcher found that administration believes that fidelity and integrity is evident in educators' dedication to the process. At the junior high level it is believed that the integrity of the fidelity is questionable. This is the result of questionable tenacity administrators found in the implementation process. Research supports that the implementation of RtI at the junior high level is challenging due to the structure of the junior high school day (Samuels, 2008).

Barnes and Harlacher (2008) point out that school professionals have a tendency to not emphasize RtI's flexible nature; thereby causing its educators to stress over the rendering of services. An administrator interviewed expressed, "That teacher "buy-in" and commitment to the process is sometimes overshadowed by teachers' commitment to teaching a specific learning standard at a specific time with no margin or room for flexibility." As a result, this researcher found that interventions while administered are done so light heartedly at times at the junior high level. This administrator's statement and the findings of the Pericola-Case, Speece, and Molly's (2003) study support the claim that reliability, validity, and "buy-in" of the total process impacts the fidelity of implementation.

Staff Roles

The findings of this study denote that this district's certified staff understands what is expected of them within the RtI process. They further believe that RtI is a process that requires input from all stakeholders. This philosophy is consistent with the findings of Gloecker (2003). Staff believes however, that their roles are impacted by the "buy-in" of both building and district level administrators. Hilton (2007) expresses in his research that principal "buy-in" is critical to staff morale, support, and understanding of the importance of the role they play in the RtI process. The findings of this study also indicated that staff believes that a zealous administrator will empower their staff in the development and implementation of this process. The studied staff expressed that empowerment can come in the form of additional trainings, staff input into the restructuring of RtI, and assistance in the day to day application of the process.

Ikeda et al. (2002) noted in instances where district level staff provided on-going trainings and supports, it was understood and ensured that RtI concepts and the integrity of implementation endured. This researcher found that educators within this district believe that when their roles change from being implementers to trainers, the integrity and fidelity of the process is momentarily compromised. Furthermore, participants in this study concluded that staff roles and the integrity of the implementation process is impacted by the reassignment of staff to new teaching positions, retirements, new hires, and the rotation of staff members in and out of the district/schools' response to intervention teams.

Research implies that problem solving teams were established to assist teachers in addressing students' challenges in a collaborative fashion (Bahr & Kovaleski, 2006). Additionally, Bahr and Kovaleski's research suggests that teachers engaged in this type of collegial collaboration are better equipped to assist students in meeting high learning outcomes. This study found that staff believe their roles change and are defined by their participation in the district's/buildings response to intervention team. It was also found that teachers who actively participated in the district/schools' response to intervention teams felt more engaged and connected to the process.

Recommendations for Future Research

This present study provided insight into certified staff's perception of the RtI process. Future research could expand this study by providing information regarding the perception of junior high and high school teachers' perception and implementation practices of RtI. In particular, a qualitative study designed to investigate how junior high

and high school certified staff made the paradigm shift to implement RtI and their perceptions of their roles in the process would prove beneficial to this field of study.

Although limited and specific individuals were selected to participate in the interviewing process, they provided significant data that was reflected in the staff survey. Longitudinal studies where interview participants were interviewed at the onset of the implementation process, and then again after several years of implementation could provide data describing the paradigm shift, and on-going professional development needs that occur within a district/school over time. In addition, the facilitation of this type of study within multiple districts or a larger district may derive greater insight as to the requirements needed to develop and sustain RtI within a district with fidelity and integrity.

Finally, limited research exists in regards to general education accountability within the process. Future research designed to investigate general education accountability and the fidelity of monitoring tools used by administrators to monitor the implementation process would benefit this area of research. Furthermore, the integrity in which the fidelity of implementation is rendered would be an interesting area of research to be developed.

Summary and Conclusions

This qualitative study used a case study design to examine the perception certified staff had of its districts' RtI trainings and implementation process. The study sought to examine administrators and certified staffs' understanding of the RtI process. Through the data obtained commonalities and themes were revealed.

The data analysis revealed five emerging themes. The themes sought to answer the proposed research questions. Data gathered generated findings that addressed how certified staff was trained to implement RtI. The identified themes discussed and identified staff's perception of the district's RtI plan. Overall, the findings were consistent with the review of the literature and other researchers' findings.

This study found that the RtI plan established within this district was successful. Success was measured by the criteria established by the Council for Exceptional Children (2007) in which RtI successful schools were found to have the following: (a) students receiving high-quality research based instruction from qualified staff in the general curriculum; (b) general education teachers are active in the assessment process; (c) school staff conducting universal screenings; (d) school staff implementing research based interventions; (e) school staff progress monitors students' performance continuously; (f) data used to determine intervention effectiveness and modifications; (g) assessments made regarding the fidelity and integrity of the instructions implementation; and (h) students are referred for specialized special education placement if needed. This district's schools and RtI teams met all the criteria noted.

Surveyed staff expressed their belief that using student-based data to determine intervention effectiveness is more accurate than using only teacher judgment. Staff also expressed and district data supports that fewer students have been referred to special education since the implementation of RtI. Consequently, over the course of the four years that the district has been training staff and implementing RtI, a decrease in special education referrals has occurred and the special education department has made

adequately yearly progress two years in a row. In addition, non-identified special education students test scores on the state's mandated test have improved.

APPENDIX A
INTERVIEW PROTOCOL FOR CERTIFIED STAFF

Certified Staff Interview Protocol

Each interview will begin with a brief explanation of the study to the participant. I will explain that although the interview will be taped recorded, their identity and responses are entirely confidential. I will also explain that if they would prefer to say something off the record, I will turn off the tape recorder.

1. How long have you been teaching at the school? What grades have you taught?
2. What do you know about the purpose of RtI?
3. What structures, resources and training have contributed to the implementation of RtI at this site?
4. Were you involved in any of the decision-making processes to implement these practices?
5. Have you received training in any of these area that have prepared you for implementing this approach?
 - a) Please describe the training.
 - b) Who provided the training (site or district)
 - c) Has it been enough? Why or why not?
6. Has there been support from leadership and administration during the implementation process?
7. What is your role and responsibilities in the district' RtI model?
8. How do you feel about the structure and effectiveness the tiers?
9. Describe how students' responsiveness to interventions will be monitored. What measures are used for progress monitoring? How are they used?
10. How are instructional methods and interventions selected?
11. In your opinion, are enough staff members in place to implement the model effectively?
12. What do you hope the RtI model can provide for the teachers and students at this school?
13. In what specific areas of implementation would you like to have support?

14. Do you think that the type and amount of assessments that are administered to monitor how students responded to instruction is appropriate? Why or why not?
15. What difficulties do you see when implementing RtI?
16. Do you feel confident about implementing RtI?
17. Is there anything else you would like to tell me in regards to your experience with RtI?

APPENDIX B

INTERVIEW PROTOCOL FOR BUILDING PRINCIPALS

Building Principals' Interview Protocol

1. How long have you been a principal at the school? How long have you been in the district?
2. What structures, resources and training may contribute to effective implementation of RtI at this site?
3. Were you involved in any of the decision making process to implement these practices?
 - a) Were the teachers involved in any decision making regarding the approach?
4. Have you received training in any of these areas that have prepared you for implementing this approach?
 - a) Trainings. Please describe.
 - b) Who provided the training (site or district)
 - c) Has it been enough? Why or why not?
5. How did the district prepare teachers for the implementation of RtI?
6. Has the district developed a method for monitoring fidelity of instruction and interventions?
7. How do you feel about the structure and effectiveness of the tiers?
8. How are instructional methods and interventions selected?
9. Who provides small group instruction? Where? How often?
10. Are there enough staff members in place to implement the model effectively?
11. What measures are used for progress monitoring?
12. Have you and your staff been provided with sufficient materials for implementation (professional development, progress monitoring, scientifically based instruction)?
13. Do you think that the type and amount of assessments that are administered to monitor students respond to instruction are appropriate? Why or why not?
14. What are the challenges facing the implementation of RtI within the district?
15. Do you feel confident about implementing RtI in the school?
16. What difficulties do you foresee when implementing RtI?
17. Is there anything else you would like to tell me in regards to your experience with RtI?

APPENDIX C

INTERVIEW PROTOCOL FOR DISTRICT ADMINISTRATORS

District Administrators' Interview Protocol

1. How long have you been a district administrator? What is your role in the district?
2. What structures and training may contribute to the effective implementation of RtI?
3. Can you describe the process for developing the model being implemented in the school district?
4. What role did you have?
5. Were administrators involved in developing the model being implemented?
6. What sort of training or professional development did the staff receive to assist them in implementing these practices?
7. Has the school developed a method for monitoring the fidelity of instruction and interventions?
8. How are instructional methods and interventions selected?
9. What measures are used for progress monitoring?
10. Has there been sufficient material provided for the implementation of RtI (professional development, progress monitoring, scientifically based instruction)?
11. What specific areas of implementation do you think may need support?
12. How do educators within the district perceive the success and challenges of RtI?
13. What are the challenges you foresee impacting RtI within the district?
14. Do you feel confident about implementing RtI in the schools?
15. What other factors have helped or hindered the implementation of RtI?
16. Is there anything else you would like to tell me in regards to your experience with RtI?

APPENDIX D
ARTIFACT REVIEW FORM

Artifact Review Form

District Level RtI In-service

Date: _____ Comments: _____

Type: _____

Evaluation Rating: _____

Date: _____ Comments: _____

Type: _____

Evaluation Rating: _____

Date: _____ Comments: _____

Type: _____

Evaluation Rating: _____

Date: _____ Comments: _____

Type: _____

Evaluation Rating: _____

Building Level Meetings

Date: _____ Comments: _____

Type: _____

APPENDIX E
CERTIFIED STAFF SURVEY QUESTIONS

Certified Staff Survey Questions

The certified staff survey will be generated through Loyola University's Opinio Survey Software. The survey is designed to ascertain staffs' perception of the RtI process currently being implemented within their district. The survey will be disseminated to all certified district staff through the district's email system. Survey responses will be presented using a Likert scale. There will be no personal identifiable information included in the survey.

For items 1-4, participant will be asked to mark the response that best represents them.

1. Job Description:

Building Administration, General Education Teacher, Special Education Teacher, Support Staff

2. Years of Experience:

Less than 1 year, 1-4 years, 5-9 years, 10-14 years, 15-19 years, 20 or more years

3. Number of years in current position:

Less than 1 year, 1-4 years, 5-9 years, 10-14 years, 15-19 years, 20 or more years

4. Grade level currently instructing:

Early childhood, elementary, junior high, district wide

The remaining questions will be answered using the likert scale responses strongly agree, agree, neutral, disagree, or strongly disagree.

5. I understand the core principles of RtI

6. The district's RtI procedures are clearly stated and understood by all the stakeholders (parents, teachers, administrators).

7. The district has provided me with the professional development needed to sustain my role in the RtI process. There will be a comment box added for additional input if applicable.

8. There is adequate staff available in my building to implement the district's RtI model. There will be a comment box added for additional input if applicable.
9. I was involved in the development and selection of scientifically-based interventions for each tier. There will be a comment box added for additional input if applicable.
10. There is adequate time provided before a student moves from one tier to another.
11. Data is used to support student intervention plans.
12. The amount and type of assessments administered to monitor students respond to instruction is appropriate.
13. I was trained to modify intervention plans based upon a student's response to intervention.
14. I participate in the problem solving team meeting.
15. Student progress is monitored through data collection.
16. Data driven decision-making contributes more to effective identification and intervention.
17. Proposed student intervention plans are supported by data.
18. The support necessary to ensure that interventions are implemented appropriately is provided. There will be a comment box added for additional input if applicable.
19. Using student-based data to determine intervention effectiveness is more accurate than using only "teacher judgment."

APPENDIX F

CONSENT TO PARTICIPATE IN INTERVIEW

CONSENT TO PARTICIPATE IN RESEARCH

Project Title: Response to Intervention: Staff perception of the implementation and development of a three-tier model of intervention.

Researcher: Erika Millhouse-Pettis

Faculty Sponsor: Diane Morrison

Introduction:

You are asked to participate in a research study conducted by Erika Millhouse-Pettis, a Ed.D candidate, under the supervision of Diane Morrison, Ed.D. from the School of Education at Loyola University Chicago. This study is being conducted solely as a Doctoral study under the auspices of the Loyola School of Education. Your participation is voluntary. Please take as much time as you need to read the consent form. If you decide to participate, you will be asked to sign this form. You will be given a copy of this form.

Purpose of the Study

This study will take a detailed look at how RtI was developed and implemented within your school district with an emphasis on the perception of the educators of the process within the district.

Procedures

If you volunteer to participate in this study, you will be asked you to participate in an interview that will last 30 to 60 minutes. You will be asked to respond to a limited number of questions. The questions are designed to probe your opinion regarding the implementation of the RtI practices within your district.

To ensure accurate data collection for subsequent review, it is planned that all interviews be audiotape recorded. Should you object to the audiotape recording of your interview, then it will not be recorded and hand note taking will be used to record your responses. Your identity will not be compromised by collection of this form of data.

Potential Risks and Discomforts

There are no foreseeable risks involved in participating in this research beyond those experienced in everyday life. There is a degree of inconvenience associated with participation in this study with regard to the loss of personal time. Additionally, there is the potential that some questions may evoke a degree of discomfort. However, no question will be asked that attempts to impinge on your right to privacy. You are not required to answer any question you are uncomfortable discussing. At no time should you feel the need to continue with the interview if you feel you would like to end it.

Potential Benefits to Subjects and/or to Society

You will not directly benefit from this study. However, this study may provide a rich description of the successes and challenges of the implantation at this site. When this study is completed, the data should contribute to ongoing improvements of the model implemented in this school district as well as for broader implementations of the framework process of RtI.

Confidentiality

Data for this study will be gathered through teacher and administrators interviews, staff surveys, and documentation review. All data collected including interview notes, audio recording tapes, transcriptions, and will only be viewed by the researcher. The researcher will keep the collected documentation in a locked file cabinet within the researcher's home. Upon completion of this research, all documentation will be destroyed.

Interview responses will be coded. Coding the responses will ensure that individual names and positions will not be utilized or identifiable. Interviewee responses will be documented in themed categories. The categories reflect the overall consensus of the responses given per question.

Voluntary Participation

You can choose whether to be in this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study.

Contacts and Questions

If you have any questions about your rights as a research participant, you may contact the Loyola University Office of Research Services at (773) 508-2689. If you have any questions or concerns about the research, please feel free to contact:

Erika Millhouse-Pettis, Researcher
(708) 895-3053, email: emillhouse@aol.com

Diane Morrison, Ed.D., Faculty Advisor, Loyola University Chicago
(312) 915-9202, email: dmorri@luc.edu

Name of Subject

Signature of Subject

Date

Researcher

Date

APPENDIX G
SURVEY COVER SHEET

SURVEY COVER SHEET

Project Title: Response to Intervention: Staff's perception of the implementation and development of a three-tier model of intervention.

Researcher: Erika Millhouse-Pettis

Faculty Sponsor: Diane Morrison

Introduction:

You are asked to participate in a research study conducted by Erika Millhouse-Pettis, a Ed.D candidate, under the supervision of Diane Morrison, Ed.D. from the School of Education at Loyola University Chicago. This study is being conducted solely as a Doctoral study under the auspices of the Loyola School of Education. Your participation is voluntary. Please take as much time as you need to read the consent form. If you decide to participate, the survey will begin after you complete reading this consent form.

Purpose of the Study

This study will take a detailed look at how RtI was developed and implemented within your school district with an emphasis on the perception of the educators of the process within the district.

Procedures

If you volunteer to participate in this study, you will be asked to give your opinion to 19 given statements. The statements are designed to ascertain your opinion regarding your perception of the district's RtI process. You will be asked to respond to the statements by indicating whether you strongly agree, agree, neutral, disagree, or strongly disagree with the statement.

Potential Risks and Discomforts

Your participation in this online survey involves risks similar to a person's everyday use of the internet. There is a degree of inconvenience associated with participation in this study with regard to the loss of personal time. Additionally, there is the potential that some questions may evoke a degree of discomfort. However, no statement will be posed that attempts to impinge on your right to privacy. You are not required to answer any statement you are uncomfortable answering. You can exit the survey at anytime if you choose not to complete it in its entirety.

Potential Benefits to Subjects and/or to Society

You will not directly benefit from this study. However, this study may provide a rich description of the successes and challenges of the implementation at this site. When this study is completed, the data should contribute to ongoing improvements of the model implemented within this school district.

Confidentiality

Confidentiality will be maintained to the degree permitted by the technology used. Your anonymity and responses to survey questions will be anonymous. By completing the survey you will be agreeing to participate in this research study.

Voluntary Participation

You can choose whether to be in this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study.

Contacts and Questions

If you have any questions about your rights as a research participant, you may contact the Loyola University Office of Research Services at (773) 508-2689. If you have any questions or concerns about the research, please feel free to contact:

Erika Millhouse-Pettis, Researcher
(708) 895-3053, email: emillhouse@aol.com

Diane Morrison, Ed.D., Faculty Advisor, Loyola University Chicago
(312) 915-9202, email: dmorri@luc.edu

APPENDIX H

LETTER RECRUITING PARTICIPATION IN INTERVIEW PROCESS

February 14, 2011

Dear Educators,

My name is Erika Millhouse-Pettis, and I am a doctoral student at Loyola University. My dissertation study is designed to analyze certified staffs' perception and training of the district's RtI plan. Through my research, I am seeking to answer the following questions:

How were certified staff trained to implement RtI as indicated by a review of district's artifacts?

What is certified staff's perception of the RtI process within the district?

Educators who participated in RtI training sessions and are currently involved in its implementation process within the district are being requested by this researcher to participate in this study. The interview is designed to gain insight into the district's trainings methods and implementation practices. I am requesting your participation. The interview will not exceed 60 minutes in length.

Your participation in this study is voluntary and you may withdraw at any time. Your anonymity and responses to interview questions will be kept strictly confidential.

If you are willing to participate, please respond to this email and I will contact you to schedule an interview.

Thank you for your time and consideration.

Respectfully,

Erika L. Millhouse-Pettis, Researcher

APPENDIX I

LETTER OF INSTITUTIONAL COOPERATION

December 3, 2010

Mrs. Erika Millhouse-Pettis

Project Title: Response to Intervention: Staff perception of the implementation and development of the three-tier model of intervention.

Researcher: Erika Millhouse-Pettis

Dear Erika,

You have proposed a study for which you will serve as investigator. Having read the synopsis of your study, I grant you approval to conduct this study within the school district.

In this study, I understand you will collect data from a staff survey, interviews, and artifacts. For the purpose of this study, all information dealing with student data shall not be included in the study for the sake of human anonymity.

This consent is provided on the condition you also receive permission from Loyola University Chicago's Institutional Review Board panel to conduct this study.

Sincerely,

District Superintendent

APPENDIX J

LETTER RECRUITING PARTICIPATION IN CERTIFIED STAFF SURVEY

May 5, 2011

Dear Educators,

My name is Erika Millhouse-Pettis, and I am a doctoral student at Loyola University. My dissertation study is designed to analyze certified staffs' perception and training of the district's RtI plan. Through my research, I am seeking to answer the following questions:

How were certified staff trained to implement RtI as indicated by a review of district's artifacts?

What is certified staff's perception of the RtI process within the district?

Educators who participated in RtI training sessions and are currently involved in its implementation process within the district are being requested by this researcher to participate in this study. The survey is designed to gain insight into the district's trainings methods and implementation practices. I am requesting that certified staff help me gather data by completing the survey at the following link:

Your participation in this study is voluntary and you may withdraw at any time. Your responses to survey questions will be kept strictly confidential.

Thank you for your time and consideration.

Respectfully,

Erika L. Millhouse-Pettis, Researcher

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VITA

Erika L. Millhouse-Pettis resides in a suburb of Chicago with her family. She graduated from Illinois State University in 1993 with a Bachelor of Science in Special Education. In 1997, she earned a Master of Arts degree in Educational Leadership and Supervision and a Type 75 School Administrative Certificate from Roosevelt University. In 2005, she completed coursework that allowed her to add a Director of Special Education endorsement to her Type 75.

Erika L. Millhouse-Pettis has worked in the field of education for 18 years. She began her career as a special education teacher. Upon leaving the structure of the classroom setting, Erika began her administrator career. In her first administrator job, she served as a Special Education Coordinator at a therapeutic day school for children with severe emotional problems. She later went on to become a Special Education Case Manager in a pre-k-8th grade school district. Currently, she is a Special Education Director in a pre-k-8th grade school district.

Erika L. Millhouse-Pettis is an educator who believes all students can achieve if given the opportunity. She also is an educator who believes in and promotes life long learning.

DISSERTATION COMMITTEE

The Dissertation submitted by Erika L. Millhouse-Pettis has been read and approved by the following committee:

Diane Morrison, Ed.D., Director
Clinical Assistant Professor, School of Education
Loyola University Chicago

Beverly Kasper, Ed.D.
Associate Dean of Academic Programs, School of Education
Loyola University Chicago

Leanne Kallemeyn, Ph.D.
Assistant Professor, School of Education
Loyola University Chicago