



CHAPTER 6

Creating a System of Interventions

Up to this point, we have focused our attention on the conditions necessary to ensure that most students succeed in initial Tier 1 core instruction. When a school creates a school culture focused on collective responsibility for student learning, ensures that every educator is part of a high-performing team, identifies the essential standards that all students must master, and frequently measures student learning and teaching effectiveness, a vast majority of the school's students are going to succeed. But our goal is not to have *most* students learn. If we want to achieve our mission of high levels of learning for *every* child, then we must be prepared with additional time and support for every student that demonstrates the need. Invariably, some students will need some extra help from time to time, while a few students will require a lot of extra help nearly every day. In other words, we must be prepared with a system of interventions designed to meet the unique needs of each child.

There are three critical considerations a school must address when creating an effective system of interventions. First, a school must build a toolbox of effective interventions. Students struggle at school for a multitude of reasons, so a school must be prepared with a variety of proven responses. Second, there must be time available during the school day to provide additional support without having students miss essential core instruction. Finally, there must be a systematic, timely, and reliable process to identify students in need of additional support. Without a foolproof identification process, some students will slip through the cracks. Failure to address these three critical components will place a school's RTI efforts on shaky ground and ultimately undermine the entire process. In this chapter, we'll examine how to create the toolbox and how to create flexible time during the school day for interventions.

What Is an Intervention?

Many schools and districts argue endlessly about the language used to define the words *intervention*, *strategy*, and *core instruction*. To bring clarity to the topic, an *intervention* is anything a school does, above and beyond what all students receive, that helps a child succeed in school. This additional support can be a practice, method, strategy, and/or program. The important consideration is this: if all kids at a school

receive it, then it is part of Tier 1 core instruction and would not be considered an intervention. If a specific practice, method, strategy, or program *in addition* to core instruction is used on the child's behalf, it is considered an intervention. Interventions are not only actions directly in support of instruction. If a child demonstrates behaviors that interfere with the child's ability to learn and the school provides additional behavioral support, that is an intervention. Attendance support for a child with chronic absenteeism is an intervention. Medical support for a student with severe diabetes is an intervention.

A system of interventions can only be as effective as the individual interventions of which it is comprised. If a site builds a system of interventions with ineffective instructional programs and practices, all students will have certain access to what is not working.

Based on our work with hundreds of schools across North America, we see two primary reasons why many schools struggle with identifying effective interventions:

1. **The “more of the same” syndrome.** When we work with schools, we often have them list their current site interventions so we can assist with evaluating their effectiveness. A standard set of traditional “interventions” that have been used for years is listed first at practically every school: remedial support classes of varying types, study hall opportunities, summer school, retention, and special education. We then ask each school for evidence that these interventions are working—and are usually met with upturned palms and blank stares.

We are not suggesting that highly effective summer school, special education, or study hall programs do not exist. A few do exist, but they are the exceptions. Research shows that the way most schools traditionally implement these programs is ineffective at best and detrimental to kids at the worst (Hattie, 2009). Our experiences as educators confirm this research. How many times have we seen a student below grade level in essential skills attend summer school, then return in the fall having significantly improved? Almost never. Instead, we often hear about how students in summer school “made up” a semester of English by attending three hours a day for six weeks. Did they master the essential learnings for the class, or simply jump through enough hoops to earn the credits? Nevertheless, most schools continue to utilize these ineffective responses.

When it comes to interventions, giving at-risk kids more of what is not working is rarely the answer. Common sense would tell us this, yet many schools continue to build their system of interventions with practices that don't work, have never worked, and have no promise of getting better results next year.

2. **The “what program do we buy?” syndrome.** Many schools fall into the trap of searching for the Holy Grail of interventions—the perfect product to buy that will help all their struggling readers, writers, or math students. Wouldn't it be great if there were a single program a school could buy and every student would learn how to read? Every school would buy this program, and we would all be enjoying record student achievement!

Unfortunately, this product does not exist. At-risk readers don't all struggle for the same reason, so there is no one program that will address every child's unique needs. Some educational supply companies market their products as a cure-all; like most major corporations, their ultimate goal is to make a profit. If a company's claim sounds too good to be true, it probably is. There *are* some very good, scientifically research-based products available that can become powerful, targeted tools in a school's intervention repertoire—but there is no silver bullet. Ultimately, there is no "intervention-in-a-box" that can beat a highly effective teacher working with a targeted group of students. A school will get much better results if it spends less time searching for the Holy Grail and more time working in collaborative teacher teams to find the most effective teaching practices for its students.

Understanding the Characteristics of Effective Interventions

How, then, does a school build a toolbox of effective interventions? The key to success is in aligning interventions to the essential characteristics of effective interventions, which are:

- Research-based
- Directive
- Administered by trained professionals
- Targeted
- Timely

Let's examine what these characteristics mean in practice in real schools.

Research-Based

NCLB and IDEIA advocate the use of interventions based on "defensible research." The law sets the gold standard as "research that involves the application of rigorous, systematic, and objective procedures to obtain reliable and valid knowledge relevant to educational activities and programs" (IDEIA, 2004).

This scientific model of testing the reliability of specific interventions has proven to be problematic. Creating blind studies with carefully controlled conditions is extremely difficult in a school setting, as so many factors contribute to a child's success in school. By strictly applying the criteria of *scientifically research-based*, some districts have created lists of "approved" interventions that constitute the only programs that can be used by their schools, subsequently restricting a school's ability to creatively meet the individual needs of each child. We also know that, outside of primary reading, there are a limited number of scientifically research-based interventions for each subject and grade level. On the other hand, failure to measure the validity of a school's chosen intervention practices has created a situation wherein "too many schools have adopted programs based on hunches and anecdotes," according to Russ Whitehurst (Dahlkemper, 2003).

To help address this problem, we suggest a reasonable definition of research-based interventions: research-based interventions are instructional practices and programs for which there is credible evidence that the intervention can work and/or is working. In other words, a school should utilize interventions for which they can point to research that demonstrates a practice has a high likelihood of working or can provide student data that demonstrates the practice is working for a majority of students who have received the intervention.

For example, a significant body of research confirms that small-group tutoring tends to be a highly effective intervention (Denton, Anthony, Parker, & Hasbrouck, 2004; Gersten et al., 2007; Gunn, Smolkowski, Biglan, & Black, 2002; Vaughn, Wanzek, Linan-Thompson, & Murray, 2007). Based on this research, a secondary language arts team reviewing student assessment data on figurative language might decide to provide small-group tutoring to the students still struggling with the concept. While it is unlikely that a scientifically research-based study validates the use of small-group tutoring to specifically teach figurative language, there is a solid base of research to support trying the practice based on the success with the strategy in general.

As another example, suppose a team of fourth-grade teachers taught two-digit multiplication, each teacher using various instructional practices, then compared common assessment results after initial teaching (see table 6.1).

Table 6.1: Percentage of Fourth-Grade Students Demonstrating Proficiency in Two-Digit Multiplication

Teacher 1	Teacher 2	Teacher 3	Teacher 4
78%	67%	83%	97%

Based on these results, the team decided to try using Teacher 4's instructional strategy to reteach the standard to the students in need of additional help. Should this team be required to first find scientifically research-based evidence supporting Teacher 4's instructional method before using it with their students? That level of research is not necessary. The team already has evidence to support their decision, as their common assessment data serve as *action research* that demonstrates Teacher 4's method has a high likelihood of success. The team's assessment data prove the practice is working on their campus.

The problem is that many schools implement interventions that lack *any* evidence that they can work and/or are working. Take the traditional practice of retention. There is no research to suggest that retention is effective. John Hattie completed a meta-study on retention and found that if a child is retained once, the chance he or she will drop out of school doubles—retained twice, dropping out is virtually assured (Hattie, 2009). If a school decides to disregard this evidence, then the school can look to evidence in its district regarding students who have been retained. Are these students doing markedly better after being retained? Are a large majority of these students graduating from high school and continuing on to higher levels of learning? We

suspect that few, if any, schools or districts in North America can produce evidence that retention is working for more than a rare handful of students.

If there is no research to suggest that an intervention can work, and no data to prove that it is working, how can any professional justify continuing the practice? As IDEIA rightly demands, our actions must be defensible.

Directive

Interventions *must* be mandatory. It is disingenuous for a school to claim that its mission is to ensure that all students learn at high levels, yet allow its students to choose failure. When help is optional, the students who are most likely to take advantage of this offer are the ones already succeeding at school, while the students least likely are those most at risk.

Making help invitational is rarely a problem at the elementary level. It is doubtful a second-grade teacher would say to the class, "If you need extra help in adding two-digit numbers, I am available at recess—come see me for help, if you want." Unfortunately, at the secondary level, it is all too common for students to be "offered the opportunity" for help. This practice of intervention by invitation is justified by a litany of misguided and illogical reasons, such as the following:

- **We are teaching the students responsibility.** Without question, student responsibility is a critical life skill. But if a school gives students the option to fail, is the school teaching responsibility, or merely punishing students for not already possessing the skill? By "offering" help, the school expects students to either have an intrinsic love of learning or to fully grasp the lifelong benefits or life-damaging consequences of not succeeding at school. This foresight would motivate students to forgo the short-term pleasures that youth enjoy, and instead delay their gratification and commit to the rigors of learning. How likely is it that the average high school student would go home after school and think: "I have a major test tomorrow in English, and the teacher has offered after-school help. But my friends have invited me to come over to play *Guitar Hero*. Let me make a T-chart and consider the short- and long-term consequences before I make my decision. If I fail the test, I will risk failing English, which is required to graduate. If I don't graduate, this will increase the chances that I will someday live on welfare, be incarcerated, and die young. Hmmm—I guess I better skip *Guitar Hero* today." Is this a fair and reasonable expectation? Research tells us that the average adolescent does not consistently make decisions based on long-term consequences and that adolescents often allow their emotions rather than decision-making processes to dictate their choices (Fischhoff, 1992; Fischhoff, Crowell, & Kipke, 1999; Ganzel, 1999).

Most educators were very responsible students, so we should ask ourselves, "Were our efforts in high school motivated by an intrinsic love of learning or the long-term vision of how our studies would help us achieve our lifelong goals?" It is much more likely that we were motivated by positive recognitions at school and/or our parents giving immediate, short-term

consequences at home. Schools that make interventions invitational are asking their students to possess a level of responsibility that many students are incapable of demonstrating consistently, all the while knowing that the students who choose poorly will most assuredly pay the price of lifelong failure for their decisions.

- **That's the real world.** Some schools claim that adults are not required to seek help, so requiring students to get help is enabling behavior that will not prepare children for the "real" world. This same logic results in classroom practices such as, "This assignment is due on Thursday. If you miss the deadline, you will receive a zero, and you cannot turn it in late or make it up. In the real world, you must meet deadlines." What if the assignment relates to an essential standard—a skill that has been deemed critical to a student's success in the course not just this year, but for years to come? Because the student will not be required to complete the assignment, or be given the opportunity to do the work for partial credit, the cost of this mistake becomes far reaching.

As educators, we live and work in the real world. Honestly, how many adult rules are there in which there are no second chances? The list is pretty short. It is not unusual for a teacher to tell students that late work will not be accepted because that is the real world, yet that same teacher will miss a deadline to turn in required paperwork to the administration. If the teacher were given an equivalent lifelong consequence for missing a school paperwork deadline, the teacher would be fired for the error. If that happened in the real world, the teacher would say the consequence was unfair, unreasonable, and unjust—and the teacher would be right!

This is not to say that adults do not pay a price for missing deadlines, or that students should not face consequences for poor choices. But the consequence should be fair; should allow students to make amends, and should not deny students the opportunity to learn. In the *real* world, adults expect nothing less.

- **It is the parents' job.** When kids do not show proper effort, many schools believe it is the parents' job to fix the problem. To some extent, this is true—parental responsibilities can have a significant impact on a child's success at school. Unfortunately, kids are not in the position to select their parents, nor do schools have much leverage on requiring parents to meet their parental responsibilities. In reality, when students are at school, the law considers the educators in loco parentis—in place of a parent. We have the responsibilities of a parent. If a child is in our care for thousands of hours over her K-12 education and does not develop the skills of responsibility, we need to take a hard look in the mirror.
- **You can't make a student do something.** Some schools feel that requiring students to do their schoolwork and attend interventions is futile, as educators do not have the ability to "make" kids do things. This perception is perplexing, as schools make students do things every day that they do not want

to do. Does the average teenager want to get up early and be at school on time every morning? These same kids often sleep until noon when allowed on the weekends. Nevertheless, at virtually every school the vast majority of students arrive on time to class every day. Why? Because student expectations are clear, staff members consistently enforce these expectations, the administration supports the staff, and consequences happen quickly and consistently when students do not meet the expectation.

When schools ask, "How do we get students to attend interventions?" our response is, "How do you get them to first period? How do you get them back from recess or lunch? How do you get them to detention for violating a behavior rule at school?" It is no different. If a school *decides* that students will attend interventions and complete their work, and *takes actions* to teach, require, and monitor this outcome, students ultimately become more responsible. Educator Jamie Virga, considering the work of Albert Bandura (1993, 1997) puts it this way: "Individuals build their self-efficacy beliefs by successfully carrying out a challenging task at a high level. After you have an experience of mastery, when you are faced with a similar experience in the future, you will be able to draw on the past experience and have a powerful expectation that you will be successful" (Virga, 2010).

Ultimately, the question is, What is the best way to teach kids responsibility *and* ensure high levels of learning? For schools that believe teaching responsibility is best achieved by giving students the option to fail, we challenge them to show evidence that this practice is working at their school. Do the students who decide against getting help benefit from their error in judgment and make better choices due to their failure? Are the students who choose to disregard their homework and miss deadlines becoming more responsible? More likely, these students are missing assignment after assignment and failing class after class, semester after semester, year after year—all the while showing no newly gained initiative to seek out extra help.

There is no evidence to suggest that higher incidence of failure produces higher levels of responsibility and academic success. If there is no research showing that giving students the option to fail works, then how can a school continue this misguided approach? Interventions must be directive.

Administered by Trained Professionals

In the medical field, patients are assigned the help of medical professionals based on the severity of their illnesses and the expertise needed to address the problem. For example, someone suffering from the flu usually sees a nurse practitioner or family physician, while a cancer patient visits an oncologist. Effective learning interventions need to apply this same guiding principle. Douglas Reeves' research (2009) shows that one of a school's most effective learning strategies is to have highly trained teachers work with the students most at risk.

Unfortunately, the vast majority of schools do the exact opposite. According to the National Partnership for Teaching in At-Risk Schools, "Not only do the teachers of low-income students tend to be more poorly trained in the subject they teach,

they also are far more likely to have significantly less teaching experience" (National Partnership for Teaching in At-Risk Schools, 2005). This is equivalent to sending patients with cold symptoms to the brain surgeon while assigning those with brain tumors to an intern.

This approach is justified at most schools by a cultural seniority system in which more tenured teachers "earn the right" to work with students who are high achieving, while new teachers must "pay their dues" with children who tend to be more low achieving. Often these practices are protected by teacher contract language that limits the ability of site administration to reassign teacher positions or revise a teacher's course or grade-level teaching assignment. School administrators sometimes support this seniority system because parents of the most successful students often complain if their child is assigned to an inexperienced teacher's class, while parents of at-risk students rarely voice this concern. Additionally, many schools have faced legal restraints to teacher assignments, as students must qualify to work with some school personnel. For example, traditional special education services were only available to students who qualified. This has forced schools to ask, What help does this student qualify for?

Because RTI allows schools to use site resources in more flexible, preventive ways, schools can now ask the more appropriate questions: What does this child need, and who on our staff is best trained to meet that need? Unless our most at-risk students have access to our most effective teachers, it is unlikely that any particular intervention strategy, practice, or program will prove effective.

Targeted

The more targeted the intervention, the more likely it will work. Most schools' interventions are ineffective because they are too broad in focus and rarely address a child's individual learning needs. For example:

- We consistently see schools offer interventions like study hall for all students with an F on their current report card. These students have earned Fs for a variety of reasons, yet one teacher is expected to address the numerous learning needs of the students in study hall.
- Schools often use universal screening data to place students in reading interventions, and then put all the kids who need intensive support in the same reading intervention. Will every student in the "red" group have the same difficulties in reading? There will surely be students who are weak in letter recognition, others who lack phonemic awareness and the ability to blend sounds into words, some who cannot recognize high-frequency sight words that have no phonemic pattern, and still others who may decode proficiently but cannot read fluently and comprehend what they are reading. All these students may score in the intensive range on a universal screening assessment, but they certainly do not have the same reading needs. It would be impossible for one teacher to meet all their needs in the same intervention period.
- Some schools place students in interventions based on prior-year state assessment results. For example, students who score below proficient on

the state math assessment are automatically placed in a two-period math class. Again, it is highly unlikely that all the students scored poorly on the state assessment for the same reasons. What if a child's problem in math was due to high levels of distractibility—will two periods of math help the child become more focused? What if the problem was poor attendance—will two periods of math help the child attend school more frequently? It is much more likely that the child will just end up missing twice as much math the next year.

To target interventions effectively, we recommend that a school consider two criteria. First, a school must target interventions by the student, by the standard, and by the learning target. In other words, what specific essential skill or knowledge is the child lacking? It is not sufficient to say the child is struggling with algebra—with what part of algebra? It is not sufficient to even say the child is struggling with a particular algebra standard—with what part of the standard? Let's break it down to solving equations—with what part of solving equations? Exponents within an equation. Again, with what specific skill with exponents? Multiplying exponents. And at this point, a teacher now knows *exactly* what to reteach this child who is "struggling with algebra" during intervention time—multiplying exponents. And if a group of students share that need, we can group them together for reteaching.

This level of intervention specificity is why concentrated instruction is so vital. Unless a school has clearly identified the essential standards that every student must master, as well as unwrapped the standards into specific student learning targets, it would be nearly impossible to have the curricular focus and targeted assessment data necessary to target interventions to this level. In the end, a school needs to continually ask, What exactly do we want students to learn from this intervention? The more specific the answer, the more targeted the intervention, and the more likely you will hit the target.

Focusing efforts by the student, the standard, and the learning target is the first step in targeting interventions, but there is a second, equally important consideration: why didn't the student learn? We must address the cause of a student's struggles, not the symptoms. When a patient has a fever, the doctor understands that the fever is not the problem, but instead is a symptom of the patient's illness. If the doctor was only concerned with the patient's temperature, the doctor could put the patient in a bathtub of ice—but the minute the patient got out of the ice bath, the high temperature would probably return. To cure the patient, the doctor must address the cause of the problem, not just the symptoms.

Similarly, a school must address the cause of a student's difficulty in learning. Failing grades, poor test scores, disruptive behavior, and poor attendance are all symptoms. The key questions are: Why is this student failing a class? Why is this child demonstrating disruptive behavior? Why did this student fail the exam? Why is this student chronically absent?

To further demonstrate this level of targeting, consider this example. Using the math example given earlier, let's say a teacher team has identified seven students who are having difficulties with multiplying exponents. The team has grouped the kids

together into the same intervention because they lack the same specific skill. That would be an excellent start. But if the school stopped there and did not dig deeper into why each student did not master the skill, what is likely to happen is this:

- Student 1 has solid prior knowledge and skills and has performed well in algebra all year—she just does not “get” the way her teacher taught multiplying exponents. She does not understand why she is being asked to add the exponents when the skill is called multiplying exponents. To address the cause of her problem, she needs to be taught the concept a different way.
- Student 2 is struggling with multiplying exponents because he still does not know how to multiply. He should have mastered the concept in third grade, but he didn’t. To address the cause of his problem, he needs help in a prior, foundational skill.
- Student 3 has chronic absenteeism. She has no problem with learning when she is present for the lesson. Unfortunately, she sometimes misses multiple days a week. To address the cause of her problem, she needs help with attendance issues.
- Student 4 is an English learner. The cause of his problem is that he does not understand what the teacher is saying. Until he gets help in academic vocabulary needed to learn the concept, he will have difficulty learning how to multiply exponents.
- Student 5 is an unmotivated learner. She understood the concept in class, but she did not go home and practice the skill for homework. We know that homework is not designed to teach kids a concept, but instead to help make what they have learned permanent. Because she did not practice the skill, she forgot how to solve the problems on the test. To address the cause of her problem, she needs to be held accountable for doing her homework.
- Student 6 has significant behavior problems. He is constantly off task, in trouble, in time out, in the office, or suspended from school. He has the skills and knowledge to learn the new concept, if he could behave long enough to stay in class. To address the cause of his problem, he needs behavioral support.
- Student 7 suffers from ADD. When being taught how to multiply exponents, she was fine on the first two steps of the process, but then a bird flew by the window, which reminded her of the project she was painting in art class, and by the time she tuned back into the math lesson, the teacher was on the fourth step, and the student was lost. To address the cause of her problem, she needs classroom strategies that help her stay focused.

These seven students are not rare examples. Teachers know their faces in every school and most likely every classroom in North America right now. If these seven students are all placed in the same intervention session to reteach them how to multiply exponents, what is the likelihood that one teacher can effectively teach the skill a different way for Student 1, while she teaches the foundational skill of multiplication to Student 2, while she fixes an attendance problem with Student 3, while she

teaches English to Student 4, while she gets Student 5 to get her work done, while she addresses the severe behavior issues of Student 6, all the while keeping the classroom environment disruption-free for Student 7? Even a masterful math teacher is probably not trained to deal with some of the causes affecting each child. No wonder teachers feel overwhelmed.

Instead of leaving each teacher to address all these issues in isolation, what if teams of teachers and school professionals discussed why each child was struggling and then grouped kids together by the skill *and* by the cause? Better yet, what if these groups were then taught by the staff member(s) best trained in each cause? A highly trained math teacher would be an excellent choice to help Student 1 or Student 2, while a school counselor may work with Student 3's absenteeism and take the lead with the school psychologist for creating a behavior plan for Student 6.

When a school can target interventions to this degree of specificity, that school can finally begin to achieve the mission of high levels of learning for every child.

Timely

An effective intervention program must respond promptly when students do not learn. At traditional schools, the monitoring of student progress usually takes place at the midpoint and end of each grading period. Educators provide quarterly and end-of-term report cards to students and their parents to mark a child's academic standing in each course of study.

This practice has two inherent problems. First, schools that merely *notify* parents of a student's failing progress are not providing an intervention; instead, they must delineate specific actions the school will undertake to provide the student additional support. Second, most grading period intervals represent 25–50 percent of the grading term. In that time, most struggling students can dig themselves into such a hole that it ends up being their grave.

To respond in a timely way, we recommend that a school identify students for extra help and/or have the ability to modify a student's interventions at least every three weeks. Recommendations to accomplish this goal will be described in the next chapter.

Aligning Interventions to All Characteristics of Effectiveness

To create a toolbox of essential interventions, a school must align each intervention it offers to *all* the essential characteristics of effective interventions: research-based, directive, administered by trained professionals, targeted, and timely. If even one essential characteristic is missing from a particular intervention, the likelihood of the intervention working is compromised. For example, a school could offer a math intervention that is research-based, administered by highly trained professionals, targeted to a specific learning target and cause, and is timely in response—but if the intervention is not directive, some students who need this help will choose not to attend. Or what if a specific reading intervention is research-based, directive, administered by trained professionals, and targeted? If the intervention is not timely, some students won't receive help until

they have dropped significantly below grade level. All the effective traits of the intervention are useless to a student whose illness has become terminal by the time the treatment is prescribed.

We find that many schools are not getting the results they desire from their current interventions because their responses are misaligned to at least one of these essential characteristics. On the other hand, when schools evaluate each of their site interventions and align them to these essential characteristics, they can take interventions that are ineffective and make them highly successful. For example, we have visited districts that offer highly successful summer school programs that featured varied targeted offerings, use research-based instructional practices, are directed to specific students, and are taught by highly trained educators. Best of all, realigning the current intervention program to include all these traits usually does not require more money and more resources. Instead, it mostly takes a new way of thinking about interventions and a restructuring of current resources. A powerful activity, the *Intervention Evaluation and Alignment Chart* (page 153 or go.solution-tree.com/rti), can assist with this process.

Planning for Tiered Support

When creating a toolbox of intervention, besides aligning each intervention to the characteristics of effective interventions, a school must also consider how it can provide interventions that vary in intensity. Visually, this concept is captured in the tiers that comprise the RTI pyramid.

Tier 2 interventions are considered supplemental or “some” help. To use a medical analogy, sometimes a child gets an earache. If left unattended, this condition could become much more serious. But with some help from the right antibiotic, the child can be good as new in no time. In the medical field, this is a Tier 2 intervention. Likewise, at every school there are kids who need a little extra support to succeed in school. The “antibiotic” for one student may be a small-group tutoring opportunity with the teacher; for another, it could be a mandatory study hall to make up an assignment that was not completed; for another, it could be a targeted reward for demonstrating positive behavior in class. The key criterion is that it is “some” help beyond what is provided for all students in Tier 1 core instruction.

Whereas Tier 2 is “some” help, Tier 3 is “a lot” of help. To refer back to our medical analogy, students in need of Tier 3 help do not have an earache—they are hemorrhaging. Subsequently, providing an antibiotic will not be nearly enough to cure their condition; they need intensive care. Similarly, some students will need a lot of help to succeed at school. For some students, intensive help can be an intensive reading support class. For another student, it can be a daily study-skills class that helps the student organize and complete his homework, or a two-period math class that provides the student both access to grade-level curriculum and targeted remediation in prerequisite skills.

There are five characteristics that can define an intervention as more intensive:

1. **Frequency.** The more often a child receives a particular support, the more intensive the intervention.

2. **Duration.** The more time a student spends receiving a particular support, the more intensive the intervention.
3. **Ratio.** The smaller the teacher-to-student ratio, the more intensive the intervention.
4. **Targeting.** The more aligned a particular support is with the individual needs of a specific student, the more intensive the intervention.
5. **Training.** The more highly trained the staff member is in the student's area of need, the more intensive the intervention.

People often ask, "How long does a student remain in Tier 2?" The answer we offer is, again, that Tier 2 is "some" help. Tier 2 can be a single tutoring session, just as one doctor's visit can address some illnesses. In other cases, Tier 2 could take weeks, just as a person may wear a cast for weeks to heal a broken bone. Likewise, Tier 3 is "a lot" of help. A patient suffering from a ruptured appendix may be rushed into surgery, receiving extremely intensive medical care. If the surgery is successful, the patient is usually discharged from the hospital within days, and fully healed within a few weeks. Conversely, a patient requiring extensive knee surgery may need months of intensive physical rehabilitation to fully heal. Both conditions require intensive medical treatment, yet the length of time at this level of treatment will vary by the illness and by the patient's response to the treatment. Learning interventions are no different. We are concerned about schools or districts that set predetermined amounts of time to any tier in the RTI process. This approach is usually instituted when RTI is viewed as a way to qualify students for special education, with rigid protocols, paperwork, and timelines dictating the process to justify special education identification.

Considering our more liberal definitions of each tier as being "some" or "a lot" of help, one might wonder why we need tiers at all. Tiers in the RTI process are not intended to be a destination, a label, or a hoop to jump through to qualify a child for special education; they are to guide our thinking. A school's efforts to ensure that all students learn at high levels start with all students having access to grade-level curriculum and quality initial instruction—this is Tier 1. No matter how well a school differentiates core instruction, some students will need supplemental help after initial teaching—this is Tier 2. Other students will enter grade-level instruction with significant gaps in foundational skills and/or severe obstacles related to effort, attendance, and/or behavior. These students will need a lot of help to succeed—this is Tier 3.

It takes all three levels—all three ways of thinking—to meet the needs of all children. How this thinking is transformed into practice can and should look different from school to school, as the needs of each school are unique, the resources are different, and the strengths of each faculty vary. But the guiding principles are the same.

Making Time for Interventions

In addition to building a toolbox of effective, increasingly intensive interventions, a school must also create time during the school day for students to receive this help. Many schools try to find the time by extending the school day for interventions, offering extra help before school, at lunch, and after school. Unfortunately, this option has

some inherent drawbacks. Most schools cannot require a student to come early or stay late, especially if the child is dependent on school transportation, must work to support the family, and/or is needed at home to help tend to younger siblings. Also, before- and after-school interventions usually extend beyond teacher contract hours, which in turn requires additional site funds to pay teachers a stipend for this work. When these funds are not available, schools often use less expensive options such as volunteers or classified staff to monitor the extended day programs. While volunteers and support staff can be helpful for some types of interventions, they often do not know the school's core curriculum, do not have access to the assessment data for each child, and do not possess the credentials or training to be highly effective in the areas they are tutoring.

This is not to suggest that all before- and after-school intervention programs are ineffective, but whatever a school offers during these times must also be offered during the school day for students who cannot come early or stay late. Ultimately, for interventions to work best, they must be offered during a time when teachers are paid to be there and students are required to be there.

Flexible Intervention Time at the Elementary Level

Creating flexible time at the elementary level is easier, as there is more flexibility in the master schedule, and a grade-level team can often alter its teaching schedule without affecting the other grades. Following are two suggestions for creating and using flexible time during the school day.

1. **Scheduled flex time.** At the start of each year, most grade-level teams sketch out a weekly plan for teaching the required subjects, "specials" times, recess, and lunch. The plan might look something like figure 6.1.

	Monday	Tuesday	Wednesday	Thursday	Friday
8:00–8:15	Calendar Time	Calendar Time	Calendar Time	Calendar Time	Calendar Time
8:15–10:00	Language Arts	Language Arts	Language Arts	Language Arts	Language Arts
10:00–10:20	Recess	Recess	Recess	Recess	Recess
10:20–11:45	Mathematics	Mathematics	Mathematics	Mathematics	Mathematics
11:45–12:30	Lunch/Recess	Lunch/Recess	Lunch/Recess	Lunch/Recess	Lunch/Recess
12:30–1:30	Science	Specials	Science	Specials	Health
1:30–2:45	Writers Workshop	Social Studies	Writers Workshop	Social Studies	Writers Workshop
2:45	Dismissal	Dismissal	Dismissal	Dismissal	Dismissal

Figure 6.1: Sample elementary schedule.

To create flexible time, the team can schedule intervention time into the weekly plan, as shown in figure 6.2 (page 144). While the way they use the time each week may vary, they have set the time aside to ensure that interventions can be provided without students missing new core instruction.

Some schools have taken this idea one step further and have scheduled flexible time across grade levels. For example, the primary grades (K-2) may schedule flexible time from 11:00 to 11:45. Instead of regrouping students based on age, they can be grouped by need. For example, there could be a second-grade student still struggling with subtracting single-digit numbers—a skill taught in first grade. This skill was recently taught as part of core instruction in first grade, and there are some first-grade students who need extra help on the same skill. Finally, a handful of kindergartners may have entered the school year already able to add single-digit numbers and are ready to learn subtraction. The prior skill for the second-grader, the core skill for the first-grader, and the enrichment skill for the kindergartner are all the same skill. Why have three different flexible groups, one at each grade level, all teaching the same skill?

2. **Push-in time.** Similar to the scheduled flex time, each grade level has been assigned a daily intervention/enrichment block of time. During this time, schoolwide resources “push into” this grade level, providing additional resources to target student needs. The push-in team may include special education staff, specialists, instructional aides, and administrators. These additional resources make it possible to provide greater differentiation during this flex time.

There is no one best way to create flexible time at the elementary level; we have seen many successful hybrids of these two approaches. The key in every case is that the school realized that all kids don't learn at the same speed. Making time a variable in the master schedule is required if a school wants all students to learn.

Flexible Intervention Time at the Secondary Level

At the secondary level, there are more obstacles to creating flexible time during the school day. It is difficult for a department or a grade level to create flexible time without affecting the entire school. Whereas a fourth-grade team can change the teaching schedule on any given day with minimal impact on the other grades, a secondary science department cannot decide to shorten classes on Fridays and create a flexible block of time to regroup and reteach kids who need extra help.

For this reason, secondary schools must create flexible time in the school's master schedule. This can usually be accomplished by shaving a couple of minutes off each class period and capturing minutes from transition times. By pooling these minutes together, the school can insert a flexible period of time in the master schedule for interventions and enrichment (visit go.solution-tree.com/rti for examples of schedules).

We want to caution secondary schools against one approach. We have seen many secondary schools create a tutorial period in their master schedules, but reap limited

Intervention Evaluation and Alignment Chart

Current Site Interventions	Research-Based	Directive	Timely	Highly Trained	Systematic	Targeted		
						Unmotivated or Failed Learner?	Tier 2 or Tier 3?	Desired Learning Student Outcome?
<p> + = Intervention is highly aligned. ✓ = Intervention is somewhat aligned. X = Intervention is not aligned. </p>							U or F	2 or 3

Effective Intervention Evaluation and Alignment Chart Protocol

This activity can be used by a leadership team and/or intervention team to evaluate schoolwide interventions, or by a teacher team to evaluate teacher-led interventions. It is recommended that this activity is completed twice a year—prior to the start of the school year, and at the midpoint of each school year.

Guiding Questions

1. **Research-Based:** Do we have evidence that the intervention can work? Do we have evidence that the intervention is working for students currently in the intervention? Score with a +, ✓, or X.
2. **Directive:** Do we require targeted students to attend? Do we hold students accountable when they don't? Score with a +, ✓, or X.
3. **Timely:** How long does it take us to identify and place a student in or out of this intervention? (Goal: At least every three weeks during the school year.) Score with a +, ✓, or X.
4. **Highly Trained:** How well trained and qualified are the individuals implementing this intervention? Score with a +, ✓, or X.
5. **Systematic:** Can we guarantee that every student who needs this intervention, gets this intervention? Score with a +, ✓, or X.
6. **Targeted—Unmotivated Learner/Failed Learner:** Is the intervention for intentional nonlearners (won't do) or failed learners (can't do)? Have we mistakenly placed nonlearners and failed learners in the same intervention? Score with a U for unmotivated learner (won't do) or an F for failed learner (can't do).
7. **Targeted—Tier 2 or Tier 3:** Is the intervention supplemental support (Tier 2) or intensive support (Tier 3)? Score with a "2" for Tier 2 or a "3" for Tier 3.
8. **Targeted—Desired Student Learning Outcome:**
 - + Are our interventions targeted to specific standards/outcomes?
 - + Are students grouped by the cause of their struggles, or the symptoms?
9. **Alignment Steps:** What actions can be taken to address any column with an "X" on the chart?
10. **The Big Picture:** Look at the list of interventions as a whole. Are there a variety and balance of offerings? For example, are there interventions targeted to both unmotivated and failed learners? Is support offered to both of these groups at Tier 2 and Tier 3?