About the National Center on Response to Intervention

Through funding from the U.S. Department of Education’s Office of Special Education Programs, the American Institutes for Research and researchers from Vanderbilt University and the University of Kansas have established the National Center on Response to Intervention. The Center provides technical assistance to states and districts and builds the capacity of states to assist districts in implementing proven response to intervention frameworks.

National Center on Response to Intervention

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Introduction

To assist states and local districts with planning for RTI, the National Center on Response to Intervention (NCRTI) has developed this information brief, *Essential Components of RTI – A Closer Look at Response to Intervention*. This brief provides a definition of RTI, reviews essential RTI components, and responds to frequently asked questions. The information presented is intended to provide educators with guidance for RTI implementation that reflects research and evidence-based practices, and supports the implementation of a comprehensive RTI framework. We hope that this brief is useful to your RTI planning, and we encourage you to contact us with additional questions you may have regarding effective implementation of RTI.

NCRTI believes that rigorous implementation of RTI includes a combination of high quality, culturally and linguistically responsive instruction, assessment, and evidence-based intervention. Further, the NCRTI believes that comprehensive RTI implementation will contribute to more meaningful identification of learning and behavioral problems, improve instructional quality, provide all students with the best opportunities to succeed in school, and assist with the identification of learning disabilities and other disabilities.

Through this document, we maintain there are four essential components of RTI:

- A school-wide, multi-level instructional and behavioral system for preventing school failure
- Screening
- Progress Monitoring
- Data-based decision making for instruction, movement within the multi-level system, and disability identification (in accordance with state law)
The graphic below represents the relationship among the essential components of RTI. Data-based decision making is the essence of good RTI practice; it is essential for the other three components, screening: progress monitoring and multi-leveled instruction. All components must be implemented using culturally responsive and evidence based practices.

**Defining RTI**

NCRTI offers a definition of response to intervention that reflects what is currently known from research and evidence-based practice.

Response to intervention integrates assessment and intervention within a multi-level prevention system to maximize student achievement and to reduce behavioral problems. With RTI, schools use data to identify students at risk for poor learning outcomes, monitor student progress, provide evidence-based interventions and adjust the intensity and nature of those interventions depending on a student’s responsiveness, and identify students with learning disabilities or other disabilities.
Levels, Tiers, and Interventions

The following graphic depicts the progression of support across the multi-level prevention system. Although discussions in the field frequently refer to “tiers” to designate different interventions, we intentionally avoid the use of this term when describing the RTI framework and instead use “levels” to refer to three prevention foci: primary level, secondary level, and tertiary level. Within each of these levels of prevention, there can be more than one intervention. Regardless of the number interventions a school or district implements, each should be classified under one of the three levels of prevention: primary, secondary, or tertiary. This will allow for a common understanding across schools, districts, and states. For example, a school may have three interventions of approximately the same intensity in the secondary prevention level, while another school may have one intervention at that level. While there are differences in the number of interventions, these schools will have a common understanding of the nature and focus of the secondary prevention level.

Each prevention level may, but is not required to, have multiple tiers of interventions.
The “What” Part of the Center’s Definition of RTI

RTI integrates student assessment and instructional intervention

RTI is a framework for providing comprehensive support to students and is not an instructional practice. RTI is a prevention oriented approach to linking assessment and instruction that can inform educators’ decisions about how best to teach their students. A goal of RTI is to minimize the risk for long-term negative learning outcomes by responding quickly and efficiently to documented learning or behavioral problems and ensuring appropriate identification of students with disabilities.

RTI employs a multi-level prevention system

A rigorous prevention system provides for the early identification of learning and behavioral challenges and timely intervention for students who are at risk for long-term learning problems. This system includes three levels of intensity or three levels of prevention, which represent a continuum of supports. Many schools use more than one intervention within a given level of prevention.

- Primary prevention: high quality core instruction that meets the needs of most students
- Secondary prevention: evidence-based intervention(s) of moderate intensity that addresses the learning or behavioral challenges of most at-risk students
- Tertiary prevention: individualized intervention(s) of increased intensity for students who show minimal response to secondary prevention

At all levels, attention is on fidelity of implementation, with consideration for cultural and linguistic responsiveness and recognition of student strengths.

RTI can be used to both maximize student achievement and reduce behavioral problems

The RTI framework provides a system for delivering instructional interventions of increasing intensity. These interventions effectively integrate academic instruction with positive behavioral supports. The Positive Behavioral Interventions and Supports (PBIS) Center (http://www.pbis.org) provides a school-wide framework
similar to the framework described herein, and the two can be combined to provide a school-wide academic and behavioral framework.

**RTI can be used to ensure appropriate identification of students with disabilities**

By encouraging practitioners to implement early intervention, RTI implementation should improve academic performance and behavior, simultaneously reducing the likelihood that students are wrongly identified as having a disability.

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### The “How” Part of the Center’s Definition of RTI

**Identify students at risk for poor learning outcomes or challenging behavior**

Struggling students are identified by implementing a 2-stage screening process. The first stage, universal screening, is a brief assessment for all students conducted at the beginning of the school year; however, some schools and districts use it 2-3 times throughout the school year. For students who score below the cut point on the universal screen, a second stage of screening is then conducted to more accurately predict which students are truly at risk for poor learning outcomes. This second stage involves additional, more in-depth testing or short-term progress monitoring to confirm a student’s at risk status. Screening tools must be reliable, valid, and demonstrate diagnostic accuracy for predicting which students will develop learning or behavioral difficulties.

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### What is a cut point?

A cut point is a score on the scale of a screening tool or a progress monitoring tool. For universal screeners, educators use the cut point to determine whether to provide additional intervention. For progress monitoring tools, educators use the cut point to determine whether the student has demonstrated adequate response, whether to make an instructional change, and whether to move the student to more or less intensive services.
Provide research-based curricula and evidence-based interventions

Classroom instructors are encouraged to use research-based curricula in all subjects. When a student is identified via screening as requiring additional intervention, evidence-based interventions of moderate intensity are provided. These interventions, which are in addition to the core primary instruction, typically involve small-group instruction to address specific identified problems. These evidenced-based interventions are well defined in terms of duration, frequency, and length of sessions, and the intervention is conducted as it was in the research studies. Students who respond adequately to secondary prevention return to primary prevention (the core curriculum) with ongoing progress monitoring. Students who show minimal response to secondary prevention move to tertiary prevention, where more intensive and individualized supports are provided. All instructional and behavioral interventions should be selected with attention to their evidence of effectiveness and with sensitivity to culturally and linguistically diverse students.

What is the difference between evidence-based interventions and research-based curricula?

We refer to an evidence-based intervention in this document as an intervention for which data from scientific, rigorous research designs have demonstrated (or empirically validated) the efficacy of the intervention. That is, within the context of a group or single-subject experiment or a quasi-experimental study, the intervention is shown to improve the results for students who receive the intervention. Research-based curricula, on the other hand, may incorporate design features that have been researched generally; however, the curriculum or program as a whole has not been studied using a rigorous research design, as defined by the Elementary and Secondary Education Act.

Monitor student progress

Progress monitoring is used to assess students’ performance over time, to quantify student rates of improvement or responsiveness to instruction, to evaluate instructional effectiveness, and for students who are least responsive to effective instruction, to formulate effective individualized programs. Progress monitoring tools must accurately represent students’ academic development and must be useful for instructional planning and assessing student learning. In addition, in tertiary
prevention, educators use progress monitoring to compare a student’s expected and actual rates of learning. If a student is not achieving the expected rate of learning, the educator experiments with instructional components in an attempt to improve the rate of learning.

**Adjust the intensity and nature of interventions depending on a student’s responsiveness**

Progress monitoring data are used to determine when a student has or has not responded to instruction at any level of the prevention system. Increasing the intensity of an intervention can be accomplished in a number of ways such as lengthening instructional time, increasing the frequency of instructional sessions, reducing the size of the instructional group, or adjusting the level of instruction. Also, intensity can be increased by providing intervention support from a teacher with more experience and skill in teaching students with learning or behavioral difficulties (e.g., a reading specialist or a special educator).

**Identify students with learning disabilities or other disabilities**

If a student fails to respond to intervention, the student may have a learning disability or other disability that requires further evaluation. Progress monitoring and other data collected over the course of the provided intervention should be examined during the evaluation process, along with data from appropriately selected measures (e.g., tests of cognition, language, perception, and social skills).

In this way, effectively implemented RTI frameworks contribute to the process of disability identification by reducing inappropriate identification of students who might appear to have a disability because of inappropriate or insufficient instruction.

**Use data to inform decisions at the school, grade, or classroom levels**

Screening and progress monitoring data can be aggregated and used to compare and contrast the adequacy of the core curriculum as well as the effectiveness of different instructional and behavioral strategies for various groups of students within a school. For example, if 60% of the students in a particular grade score below the cut point on a screening test at the beginning of the year, school personnel might consider the appropriateness of the core curriculum or whether differentiated learning activities need to be added to better meet the needs of the students in that grade.
NCRTI has received numerous questions about RTI from state and local educators, families, and other stakeholders across the country. Below, we provide answers to frequently asked questions.

**What is at the heart of RTI?**
The purpose of RTI is to provide all students with the best opportunities to succeed in school, identify students with learning or behavioral problems, and ensure that they receive appropriate instruction and related supports. The goals of RTI are to:

- Integrate all the resources to minimize risk for the long-term negative consequences associated with poor learning or behavioral outcomes
- Strengthen the process of appropriate disability identification

**What impact does RTI have on students who are not struggling?**
An important component of an effective RTI framework is the quality of the primary prevention level (i.e., the core curriculum), where all students receive high-quality instruction that is culturally and linguistically responsive and aligned to a state’s achievement standards. This allows teachers and parents to be confident that a student’s need for more intensive intervention or referral for special education evaluation is not due to ineffective classroom instruction. In a well designed RTI system, primary prevention should be effective and sufficient for about 80% of the student population.

**What is universal screening?**
NCRTI defines universal screening as brief assessments that are valid, reliable, and demonstrate diagnostic accuracy for predicting which students will develop learning or behavioral problems. They are conducted with all students to identify those who are at risk of academic failure and, therefore, need more intensive intervention to supplement primary prevention (i.e., the core curriculum). NCRTI provides a review of tools for screening at http://www.rti4success.org.

**What is student progress monitoring?**
NCRTI defines student progress monitoring as repeated measurement of performance to inform the instruction of individual students in general and special
education in grades K-8. These tools must be reliable and valid for representing students’ development and have demonstrated utility for helping teachers plan more effective instruction. Progress monitoring is conducted at least monthly to:

- Estimate rates of improvement
- Identify students who are not demonstrating adequate progress
- Compare the efficacy of different forms of instruction to design more effective, individualized instruction


**What are culturally and linguistically responsive practices?**
The use of culturally and linguistically responsive practices by teachers and other school staff involves purposeful consideration of the cultural, linguistic, and socio-economic factors that may have an impact on students’ success or failure in the classroom. Attention to these factors, along with the inclusion of cultural elements in the delivery of instruction, will help make the strongest possible connection between the culture and expectations of the school and the culture(s) that students bring to the school. Instruction should be differentiated according to how students learn, build on existing student knowledge and experience, and be language appropriate. In addition, decisions about secondary and tertiary interventions should be informed by an awareness of students’ cultural and linguistic strengths and challenges in relation to their responsiveness to instruction.

**What are differentiated learning activities?**
Teachers use student assessment data and knowledge of student readiness, learning preferences, language and culture to offer students in the same class different teaching and learning strategies to address their needs. Differentiation can involve mixed instructional groupings, team teaching, peer tutoring, learning centers, and accommodations to ensure that all students have access to the instructional program. Differentiated instruction is NOT the same as providing more intensive interventions to students with learning problems.

**What is the RTI prevention framework?**
RTI has three levels of prevention: primary, secondary, and tertiary. Through this framework, student assessment and instruction are linked for data-based
decision-making. If students move through the framework’s specified levels of prevention, their instructional program becomes more intensive and more individualized to target their specific areas of learning or behavioral need.

**What is primary prevention?**
Primary prevention, the least intensive level of the RTI prevention framework, typically includes the core curriculum and the instructional practices used for all students. Primary prevention includes:

- A core curriculum that is research-based
- Instructional practices that are culturally and linguistically responsive
- Universal screening to determine students’ current level of performance
- Differentiated learning activities (e.g., mixed instructional grouping, use of learning centers, peer tutoring) to address individual needs
- Accommodations to ensure all students have access to the instructional program
- Problem solving to identify interventions, as needed, to address behavior problems that prevent students from demonstrating the academic skills they possess

Students who require interventions due to learning difficulties continue to receive instruction in the core curriculum.

**What is meant by core curriculum within the RTI framework?**
The core curriculum is the course of study deemed critical and usually made mandatory for all students of a school or school system. Core curricula are often instituted at the elementary and secondary levels by local school boards, Departments of Education, or other administrative agencies charged with overseeing education.

**What is secondary prevention?**
Secondary prevention typically involves small-group instruction that relies on evidence-based interventions that specify the instructional procedures, duration (typically 10 to 15 weeks of 20- to 40-minute sessions), and frequency (3 or 4 times per week) of instruction. Secondary prevention has at least three distinguishing characteristics: it is evidence-based (rather than research-based); it relies entirely on adult-led small-group instruction rather than whole-class instruction; and it involves a clearly articulated, validated intervention, which should be adhered to
with fidelity. NCRTI has established a Technical Review Committee (TRC) which is conducting a review of the rigor of instructional practices for secondary prevention. The results of this review will be posted at http://www.rti4success.org.

Secondary prevention is expected to benefit a large majority of students who do not respond to effective primary prevention. As evidenced by progress monitoring data, students who do not benefit from the interventions provided under secondary prevention may need more intensive instruction or an individualized form of intervention, which can be provided at the tertiary prevention level.

**What is tertiary prevention?**

Tertiary prevention, the third level of the RTI prevention framework, is the most intensive of the three levels and is individualized to target each student’s area(s) of need. At the tertiary level, the teacher begins with a more intensive version of the intervention program used in secondary prevention (e.g., longer sessions, smaller group size, more frequent sessions). However, the teacher does not presume it will meet the student’s needs. Instead, the teacher conducts frequent progress monitoring (i.e., at least weekly) with each student. These progress monitoring data quantify the effects of the intervention program by depicting the student’s rate of improvement over time. When the progress monitoring data indicate the student’s rate of progress is unlikely to achieve the established learning goal, the teacher engages in a problem-solving process. That is, the teacher modifies components of the intervention program and continues to employ frequent progress monitoring to evaluate which components enhance the rate of student learning. By continually monitoring and modifying (as needed) each student’s program, the teacher is able to design an effective, individualized instructional program.

**Why is a common framework for RTI helpful?**

A common RTI framework may strengthen RTI implementation by helping schools understand how programming becomes increasingly intensive. This helps schools accurately classify practices as primary, secondary, or tertiary. These distinctions should assist building-level administrators and teachers in determining how to deploy staff in a sensible and efficient manner.

**How many tiers of intervention should an RTI framework have?**

Schools and districts vary widely in the number of tiers included in their RTI frameworks. Regardless of the number of tiers of intervention a school or district
implements, each should be classified under one of the three levels of prevention: primary, secondary, or tertiary. Within this three-level prevention system, schools may configure their RTI frameworks using 4, 5, or more tiers of intervention. In choosing a number of tiers for their RTI framework, practitioners should recognize that the greater the number of tiers, the more complex the framework becomes. All students receive instruction within primary prevention level, which is often synonymous with tier 1.

**Is RTI a special education program?**
No. RTI is not synonymous with special education. Rather, special education is an important component of a comprehensive RTI framework that incorporates primary, secondary, and tertiary levels of prevention. All school staff (e.g., principal, general educators, special educators, content specialists, psychologists) should work together to implement their RTI framework and make decisions regarding appropriate intensity of interventions for students. Movement to less intensive levels of the prevention framework should be a high priority, as appropriate.

**What does RTI have to do with identifying students for special education?**
IDEA 2004 allows states to use a process based on a student’s response to scientific, research-based interventions to determine if the child has a specific learning disability (SLD). In an RTI framework, a student’s response to or success with instruction and interventions received across the levels of RTI would be considered as part of the comprehensive evaluation for SLD eligibility.

**How does an RTI framework work in conjunction with inclusive school models and Least Restrictive Environment? Aren’t students requiring more intensive levels of instruction removed from the general education classroom to receive those services?**
Within an RTI framework, the levels refer only to the intensity of the services, not where the services are delivered. Students may receive different levels of intervention within the general education classroom or in a separate location with a general education teacher or other service providers. This is an important decision for educators to consider carefully.
Can students move back and forth between levels of the prevention system?

Yes, students should move back and forth across the levels of the prevention system based on their success (response) or difficulty (minimal response) at the level where they are receiving intervention, i.e., according to their documented progress based on the data. Also, students can receive intervention in one academic area at the secondary or tertiary level of the prevention system while receiving instruction in another academic area in primary prevention.

What’s the difference between RTI and PBIS?

RTI and PBIS are related innovations that rely on a three-level prevention framework, with increasing intensity of support for students with learning or behavioral problems. Schools should design their RTI and PBIS frameworks in an integrated way to support students’ academic and behavioral development. For more information on PBIS, see http://www.pbis.org.

I’ve got the basics, where should I go from here?

The NCRTI library provides more information on a variety of RTI topics. In particular, we suggest that you take a look at the following resources:

- NCRTI’s *What is Response to Intervention?* webinar
- NCRTI’s *Planning for the Implementation of RTI* webinar
- *Getting Started with SLD Determination*
- *Addressing Disproportionality through Culturally Responsive Educational Systems*
- NCRTI’s *Screening and Progress Monitoring Tool Charts*
- *Using Differentiated Instruction to Address Disproportionality*
- NCRTI’s *Glossary of RTI Terms*
National Center on Response to Intervention
1000 Thomas Jefferson Street, NW
Washington, DC 20007
Phone: 877–784–4255
Fax: 202–403–6844
Web: http://www.rti4success.org