

Intervention Delivery Guidelines for the Tiers

Tier I

Tier I strategies/interventions should be delivered as a part of the regular classroom instruction that already includes differentiation and strategies that are a part of instruction for all children. The instruction or strategies must be research-based. The parent should be involved in the Problem-Solving Model and delivery of activities (typically provided by the school) to help the child practice at home. **There should be no pull-outs at Tier I. Using someone to come into the classroom at Tier I should be used minimally if at all.**

Tier II

At Tier II, the child continues to receive the regular classroom instruction, along with whatever differentiated instruction is most appropriate. At this tier, someone could come into the classroom to work with the child (or a small group) on a limited basis. Pull-out services could be considered at this point, but only on a limited basis, such as 2-3 times/wk for perhaps 15-30 minutes in a small group. Parent involvement should continue at this level.

Keep in mind that it is not best practice to place students with the greatest needs with the least trained staff. If TA's are utilized, allow them to work with more advanced students while trained certified teachers/staff work with at-risk students.

Interventions at this level must be research-based and may be programmatic such as Sonday, Letterland, Fountas and Pinnell, Foundations, Language!, etc... They must be delivered with fidelity and integrity.

Tier III

At Tier III the SST becomes involved to assist in the process of determining additional and/or most appropriate interventions. Interventions at this level will likely increase in intensity duration and/or frequency. The child will continue to receive the regular classroom instruction, along with differentiated instruction that is determined to be most appropriate. Interventions could be provided in the classroom, working with the child (or a small group). The pull-out(s) could increase in intensity, duration and/or frequency. For example a child might experience a change of intervention from 3 times/wk for 30 minutes per session to 5 times/wk for 30 minutes per session. Parent involvement should continue or perhaps intensify.

Interventions at this level must continue to be research-based and include programmatic interventions such as Sonday, Letterland, Fountas and Pinnell, Foundations, Language!, etc, but delivered with more intensity in terms of frequency and duration. They must be delivered with fidelity and integrity.

Tier IV

If the decision is made in the SST to move a child to Tier IV, that will signify a referral to MDT.

Something to keep in mind:

RTI is a tiered process with each tier becoming more intense than the previous. Sometimes all a child needs is a minimal amount of differentiated instruction to improve a deficit area.