Response to Intervention (RTI) in Early Childhood
Building Consensus on the Defining Features

Background and Purpose

Response to Intervention (RTI) is an approach that is gaining acceptance in kindergarten-Grade 12 in many schools throughout the U.S. RTI has a dual focus – improving the quality of instructional practices for all students, and as providing additional instructional and behavioral supports for some students to ensure that every student succeeds in school. Although there is not a single definition or agreed-upon way of implementing RTI, the key features of this approach generally involve gathering information on students' skills to help teachers plan and organize instruction, providing evidence-based interventions and supports, and monitoring student progress in learning. A growing body of research indicates that RTI is effective for addressing learning difficulties among school-age children, with strong evidence for the effectiveness of targeted reading and math interventions for this age group.[1,2]

In recent years, the use of RTI practices to support learning and development in children prior to kindergarten has generated widespread interest in the early childhood field. However, there is considerable variability in how familiar people are with this approach, ranging from individuals having little or no awareness or understanding about RTI to some programs beginning to implement this approach with three-to-five year-olds[3]. Furthermore, there is little research evidence at this time to guide the use of RTI with children prior to kindergarten. As a result, a number of questions about RTI in early care and education programs have emerged—what practices define RTI, who implements it, which children and families are affected, who benefits, and how does RTI fit within existing practices and services?[4]

In response to the critical need for reliable information on RTI, and with input from national experts and key stakeholders, the National Professional Development Center on Inclusion (NPDCI) created this concept paper on RTI in early childhood. This paper offers a framework for thinking about the meaning of RTI in early childhood. In addition, it outlines important considerations for early care and education programs that choose to adopt and implement RTI. Finally, it provides recommendations for how the concept paper can be used by families, practitioners, administrators, researchers, and policymakers to guide and inform future efforts related to RTI in early childhood.

Response to Intervention: A Framework for Linking Assessment with Instruction

RTI practices for school-age children are shaped by the following defining principles: (a) the use of formative assessment and learning standards to guide instructional decision-making, (b) the use of effective instruction as well as evidence-based interventions and supports that are matched to students' learning needs, (c) a focus on maximizing student achievement as well as preventing learning difficulties and behavior problems, and (d) an emphasis on collaboration and problem-solving to plan instruction and interventions and assess how well students respond to them.[5,6]

The principles that serve as the foundation for RTI are consistent with those widely acknowledged in early childhood. These include, for example, the emphasis on high quality curriculum and intentional teaching, the use of valid and reliable assessments aligned with early learning and program standards to make sound instructional decisions, the need for collaboration with families and professionals to guide decision-making, and the importance of intervening early with children who need additional instructional or behavioral supports.[7] RTI provides a comprehensive, systematic approach for instructional decision-making that complements and extends recommended practices in early childhood, for example, by helping practitioners use assessment to determine the intensity of interventions and supports that children need.

RTI is a framework that can be used in early childhood to help practitioners connect children's formative assessment results with specific teaching and intervention strategies. RTI is designed to improve instructional practices for all children and includes foundational instructional practices as well as the provision of additional supports for children with varying learning needs such as those with learning difficulties, challenging behaviors, disabilities, or who are dual language learners.

RTI: Key Components

The key components of an RTI approach in early childhood are: (a) formative assessment, (b) instruction and tiered interventions/supports, and (c) collaboration and data-based decision-making.
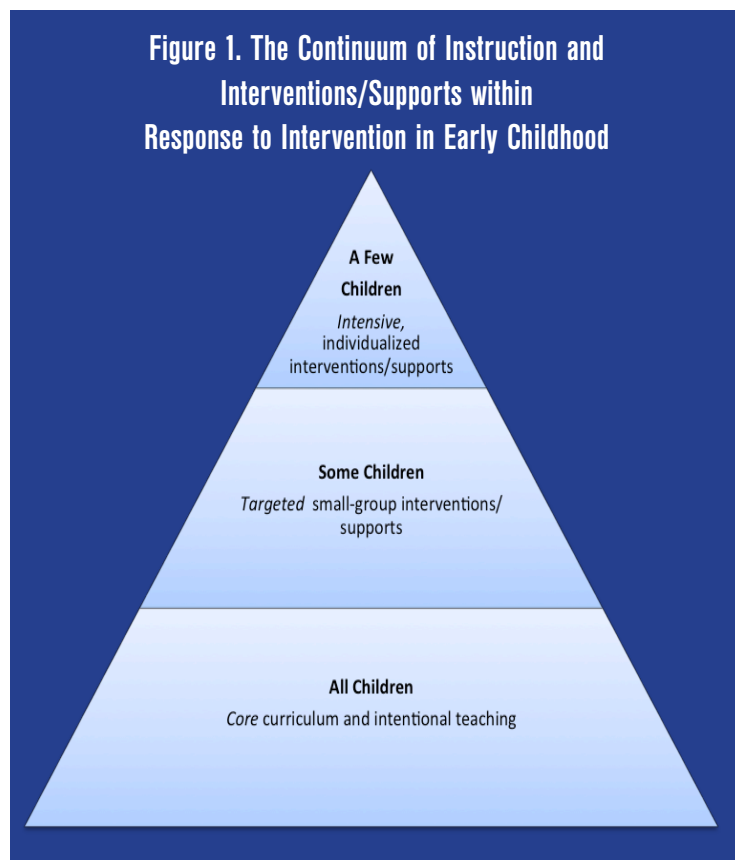
Formative assessment. Assessment within RTI is formative which means that information is gathered on children's behavior and skills and used to inform instructional decisions. To guide decisions regarding the effectiveness of instruction and children's responsiveness to interventions, formative assessment should reflect measurable and relevant learning goals for young children.

Universal screening and progress monitoring are particular types of formative assessment used within RTI. Universal screening involves gathering information periodically on *all* children in a classroom or program to monitor their development and learning, and to determine whether *some* children might need additional interventions to acquire key skills in academic learning or behavior regulation. Progress monitoring is designed to gather additional information on the children who receive targeted interventions to determine their responsiveness to these interventions. Together, universal screening and progress monitoring represent one component of a comprehensive assessment plan which also should include developmental screening, diagnostic assessment, and program evaluation. [7]

Instruction and tiered interventions/ supports. An effective core curriculum and intentional teaching are the foundation of instructional practices for RTI in early childhood. Intentional teaching means the purposeful organization of the early learning environment and developmentally appropriate learning activities within a comprehensive curriculum to help children develop and acquire important skills. In RTI, the concept of intentional teaching is expanded to include targeted interventions for some children who require additional academic or behavioral supports, generally provided through small-group instruction, embedded instruction/ interventions, or individualized scaffolding. Instructional strategies and behavioral supports are arranged by tiers from least to most intensive to show the level of adult involvement needed to help individual children learn. The targeted

Figure 1. The Continuum of Instruction and Interventions/Supports within Response to Intervention in Early Childhood

A Few Children
Intensive, individualized interventions/supports

Some Children
Targeted small-group interventions/ supports

All Children
Core curriculum and intentional teaching

interventions for some children provide instructional supports in addition to those provided to all children through the core curriculum and intentional teaching. Figure 1 shows the continuum of instruction, interventions, and supports within an RTI framework.[8] The figure is intended to show how educators can organize instruction, interventions, and supports within an RTI framework as opposed to labeling children or placing them in tiers.

Collaboration and data-based decision-making. RTI includes methods that practitioners can use to collaborate with families, specialists, and others to plan and organize learning and behavioral supports and to assess how well children are responding to them. Broader, system-level supports also are needed to support an RTI approach. These include ongoing professional development, methods for gathering and reporting assessment results, and strategies for documenting and sharing information with families and others.

Considerations for Implementation

Because RTI is a framework that involves a set of related instructional practices (e.g., formative assessment, instruction, and tiered interventions and supports), a number of decisions must be made to support its implementation in early care and education programs serving children prior to kindergarten. Many of these decisions will need to be made at the program-level with input from key stakeholders such as administrators, practitioners, and families. The following are important considerations for early childhood programs planning to adopt or implement RTI practices.

1. **Early care and education programs that choose to adopt RTI should engage in a strategic planning process prior to implementation.** Key considerations related to this activity include determining who will be involved in the planning effort and how decisions will be made, identifying how RTI fits with existing program policies and practices, and addressing logistics such as determining the need for administrative approval and resources, and creating a time frame for implementation.

2. **Important decisions related to implementing RTI will need to be made.** Several decisions that should be addressed early in the planning process are related to the context and scope of implementation (e.g., determining whether RTI should be used with children ages birth to five or limited to pre-kindergarten children); deciding whether the focus of RTI will be on academic learning (e.g., language, literacy, math, science), behavioral supports and social-emotional development, or a combination of these; choosing to implement RTI in a few demonstration sites versus implementing it more broadly across an entire system. Other critical decisions include identifying valid and meaningful assessment approaches and benchmarks to inform instructional decision-making, selecting research-based curricula and tiered interventions linked to curriculum goals and program standards, and specifying how early childhood practitioners will collaborate with families, specialists, and administrators to support data-based decision-making.

3. **Systemic supports are needed to ensure that RTI is implemented appropriately and is beneficial for young children and their families.** Planners should identify RTI assessment and intervention practices, consider how to define the roles of teachers and specialists, and provide ongoing professional development and support for implementing RTI; determine agreed-upon methods for sharing information about children's developmental progress with families and professionals; determine how to provide time for collaboration and allocate resources related to using RTI; and make provisions for evaluating the implementation and effectiveness of RTI for young children and families.

Recommendations for How to Use this Concept Paper

Reaching consensus on the meaning of RTI in early childhood and identifying key considerations related to its implementation are important first steps in articulating the field's collective wisdom on this issue. The following recommendations address ways in which this paper can be used by families, practitioners, administrators, higher education faculty, and professional development providers, researchers, and policy makers to guide future efforts related to RTI in order to:

- **Advocate for family involvement and engagement in early childhood programs in which RTI is implemented.** Building on ways that families already use to communicate and collaborate with practitioners, RTI presents new opportunities for families to share their unique perspectives and participate in data-based decision-making in collaboration with early childhood program staff. Families, in turn, can help the early childhood programs understand what additional information and guidance would be helpful to families as the field gains experience in implementing RTI. Programs should consider ways of sharing information on RTI that are accessible and understandable to families who vary widely with respect to culture, language, and experience with educational issues.

- **Promote professional development on RTI to ensure that practitioners acquire the knowledge, skills, and ongoing supports needed to implement this approach effectively in practice.** Ongoing professional development is vital to helping practitioners learn new skills related to using formative assessment and linking instructional strategies and specific learning goals. Practitioners also need new skills in interpreting assessment results and selecting appropriate interventions and supports. As practitioners apply these skills in practice settings, they will need ongoing professional support using approaches such as coaching, mentoring, consultation, and communities of practice.

- **Guide strategic planning and decision-making about whether and how to implement RTI in early childhood settings.** To use RTI effectively, practitioners will need to participate in strategic planning and obtain the full support of administrators, specialists, and families as part of a problem-solving process. In most cases, administrators will take the lead in organizing strategic planning efforts, securing resources, and making provisions for ongoing professional development to ensure that RTI practices are implemented appropriately. In some cases, it may be beneficial for strategic planning to occur at a community-wide level to ensure that various types of early care and education programs build consensus and a shared vision of how RTI can enhance services and supports for young children and their families.

- **Identify gaps in knowledge regarding the implementation and efficacy of RTI in early care and education programs.** Research is needed to advance knowledge about the best way to implement RTI to enhance academic learning and social-emotional development in young children with diverse learning characteristics in various types of programs. Research is needed to provide evidence that this approach is acceptable, feasible, and effective for these children and families.

- **Identify policy gaps and the need for additional resources to support implementation of RTI on a broader scale.** Additional resources and policies are needed to guide the adoption and use of RTI in early care and education programs and to support its implementation on a broader scale.

Future Directions

The use of RTI with children prior to kindergarten entry is an emerging practice. RTI holds promise for supporting learning and development prior to kindergarten, but additional research is needed to provide direct evidence of the effectiveness of this approach with younger children. Although there is now a body of evidence on the effectiveness of RTI for improving the academic performance of school-age students, the early childhood field is only beginning to gather research evidence on RTI to guide its implementation with children prior to kindergarten. Furthermore, unlike the use of RTI with school-age children, there are no specific provisions within federal legislation or national policies addressing RTI for younger children in pre-kindergarten, child care, Head Start, and early intervention programs to guide the professional and program standards needed to support these practices. In light of the widespread interest in RTI, the early childhood field needs additional policies, guidelines, and resources to support its implementation in the future. Furthermore, early educators who choose to implement RTI will need to ensure that this approach complements effective practices and services already in place and adds value by providing additional supports for children who need them; that early childhood programs continue to address all developmental domains (including social-emotional development and academic learning); and that all practices reflect the cultural, linguistic, and developmental diversity of children and families served within the early care and education system.

Endnotes

1   Gersten, R., Beckmann, S., Clarke, B., Foegen, A., Marsh, L., Star, J.R., & Witzel, B. (2009). *Assisting students struggling with mathematics: Response to Intervention (RTI) for elementary and middle schools* (NCEE 2009-4060). Washington, DC: U.S. Department of Education, Institute of Education Sciences, National Center for Education and Regional Assistance. Retrieved from http://ies.ed.gov/ncee/wwc/publications/practiceguides/

2   Gersten, R., Compton, D., Connor, C. M., Dimino, J., Santoro, L., Linan-Thompson, S., & Tilly, W. D. (2008). *Assisting students struggling with reading: Response to Intervention and multi-tier intervention for reading in the primary grades.* (NCEE 2009-4045). Washington, DC: U.S. Department of Education, Institute of Education Sciences, National Center for Education and Regional Assistance. Retrieved from http://ies.ed.gov/ncee/wwc/publications/practiceguides/

3   See summaries of discussions on RTI in early childhood from eight listening sessions conducted at national conferences and meetings of a national expert panel and a DEC/NAEYC/NHSA work group related to the formulation of this concept paper available at http://community.fpg.unc.edu/resources/articles/RTI-EC

4   In 2010, the Office of Special Education Programs in the U.S. Department of Education issued informal guidance on issues regarding the use of RTI to determine eligibility for special education for three-to-five year-olds, RTI procedures for referrals from Head Start to local education agencies (LEAs), and parental rights related to requests for evaluation of children's development and learning in the context of RTI. The guidance is available at http://www.nectac.org/idea/clarfctnltrs.asp

5   For additional information on how RTI is defined and implemented with school-age children, see National Center on Response to Intervention (March 2010). *Essential components of RTI – A closer look at Response to Intervention.* Washington, DC: U.S. Department of Education, Office of Special Education Programs, Author. Available at http://www.cldinternational.org/Articles/rtiessentialcomponents.pdf

6   Sugai, G. (May, 2009). *School-wide positive behavior support and response to intervention.* Storrs, CT: University of Connecticut, OSEP Center on Positive Behavioral Interventions and Supports available at http://www.pbis.org/common/pbisresources/presentations/Sugai_2009rSWPBS_RtI%20final_May25_2009.pdf

7   For information on core principles and recommended practices related to assessment and instruction in early childhood, see the following sources:

    DEC. (2007). Promoting positive outcomes for children with disabilities: *Recommendations for curriculum, assessment, and program evaluation.* Missoula, MT: Author. Available at http://www.naeyc.org/files/naeyc/file/positions/PrmtgPositiveOutcomes.pdf

    NAEYC/NAECS/SDE. (2003). *Early childhood curriculum, assessment, and program evaluation: Building an effective, accountable system in programs for children birth through age 8.* A Joint Position Statement of the National Association for the Education of Young Children (NAEYC) and the National Association of Early Childhood Specialists in State Departments of Education (NAECS/SDE). Available at http://www.naeyc.org/files/naeyc/file/positions/pscape.pdf

    Sandall, S., Hemmeter, M. L., Smith, B. J., & McLean, M. E. (2005). *DEC recommended practices: A comprehensive guide for practical application in early intervention/early childhood special education.* Missoula, MT: Division for Early Childhood (DEC) of the Council for Exceptional Children (CEC).

    U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start. (2010). *The Head Start child development and early learning framework: Promoting positive outcomes in early childhood programs serving children 3–5 years old.* Washington, DC: Author. http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/teaching/eecd/Assessment/Child%20Outcomes/revised-child-outcomes.html

8   The conceptual framework for the continuum of interventions and supports within RTI in early childhood is consistent with the way this has been conceptualized for school-age children, although the content and implementation of instructional practices will vary depending on the age group.

National Professional Development Center on Inclusion

Helping states achieve an integrated professional development system that supports high quality inclusion

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The National Professional Development Center on Inclusion (NPDCI) works with states to help them achieve a system of high quality, cross-sector professional development to support inclusion of young children with disabilities in early childhood settings. NPDCI offers states an integrated, facilitated sequence of planning and technical assistance to develop, implement and monitor a plan for professional development and inclusion, along with tools and products to support state efforts. NPDCI is devoted to collective learning and system improvements in professional development for early childhood inclusion.

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