

FACT SHEET



PEDIATRICS

AMERICAN PHYSICAL THERAPY ASSOCIATION

Section on Pediatrics, APTA

1111 North Fairfax Street
Alexandria, VA 22314-1488

Phone 800/999-2782, ext 3254
E-mail: peditrics@apta.org

www.pediatricapta.org

 **APTA**
American Physical Therapy Association.

FAQs on Response to Intervention (RtI) for School-based Physical Therapists

What Is Response to Intervention (RtI)?

The National Research Center on Learning Disabilities defines RtI as “an assessment and intervention process for systematically monitoring student progress and making decisions about the need for instructional modifications or increasingly intensified services using progress monitoring data.”^{1 (p12)}

How Is RtI Implemented?

It is delivered through high-quality, scientifically based classroom instruction, universal screening, and ongoing student assessment and progress monitoring in the general education environment.¹

RtI Is a Multi-tiered System (Up to 3 or 4 Tiers):

- Tier 1: 80-85% of all students are successful in the core curriculum. Students receive high-quality, scientifically based instruction provided by qualified personnel.
- Tier 2: Approximately 15% of students are not making adequate progress in Tier 1. These students are provided with interventions matched to their levels of performance and rates of progress.
- Tier 3: Approximately 5% of students receive 1:1 interventions that target the individual student’s skill deficits. Students who do not achieve the desired level of progress in response to these targeted interventions are then referred for a comprehensive evaluation and considered for eligibility for special education services under the Individuals with Disabilities Education Improvement Act of 2004 (IDEA).^{2,3}

What Is the Purpose of RtI?

RtI works to identify students who are not performing as expected within the general education curriculum. Traditionally, special education makes the assumption that issues with behavior or learning are associated with the individual student. RtI reviews the curriculum and how it is being implemented prior to referral for special education. Various strategies are then used to assist students who are not benefiting from the standard curriculum.⁴

How Does RtI Relate to IDEA?

- Early-intervening services are an important component of RtI. These services are defined by IDEA 2004 as “a set of coordinated services for students in kindergarten through grade 12 who are not currently identified as needing special education or related services, but who need additional academic and behavioral support to succeed in a general education environment.”^{5(p53)}
- Students who do not achieve the desired level of progress in response to Tier 3 interventions are then referred for a comprehensive evaluation and considered for eligibility for special education services under IDEA 2004. The data collected during Tiers 1, 2, and 3 are included and used to make the eligibility decision.²
- At any point in an RtI process, IDEA 2004 allows parents to request a formal evaluation to determine eligibility for special education. An RtI process may not be used to deny or delay a formal evaluation for special education.²

Can Students Who Already Have an Individualized Education Program (IEP) Receive RtI Services?

Yes. “There is nothing in IDEA that prohibits children with disabilities who are receiving special education and related services under IDEA from receiving instruction using RtI strategies unless the use of such strategies is inconsistent with their individualized education programs (IEPs).”^{6(#A-1)}

How Can Federally Funded Physical Therapists Provide Services to Students Without an IEP?

Many school systems have found related service providers or specialized instructional support personnel so valuable to the RtI process that general education administrators have “bought back” some of the time that these providers spend on RtI initiatives. In addition, PTs may consult with general education teachers as a part of early intervening services (EIS).

How Can Physical Therapists Participate in RtI?

PTs should remember that in RtI, our client is the teacher, not the child. State physical therapy practice acts may dictate the extent to which PTs may participate in RtI, particularly with regard to direct access. District policies may delineate implementation procedures as well. PTs may provide support to teachers and staff in order to enhance student participation in their educational environment through the following:

- Universal screenings
- Professional development
- Collaboration with teachers and staff
- Referral process to special education⁷

The Following Are Examples of How PTs Can Support Students in General Education at the Various Tiers:

Tier 1: Universal Intervention

- Provide in-services to teachers on typical development and indicators of academic readiness.
- Assist with environmental design to reduce or enhance performance.
- Provide in-services to administrators, teachers, and other staff members on strategies to promote alertness through incorporation of movement activities.
- Provide in-services to teachers and staff on possible environmental modifications that can maximize posture to enhance learning and participation.
- Provide in-services to administration on benefits of including recess in the students' school day.
- Provide in-services to staff on PTs' role in RtI and provide resources and equipment guides.

Tier 2: Targeted Intervention

- Participate in building-level/problem-solving process at grade/class subgroup level.
- Suggest alternative materials to promote participation and performance for remediation and enrichment.
- Explore environmental triggers to behaviors in daily routines.
- Suggest purposeful activities for classroom and leisure time.

Tier 3: Intensive Interventions

- Participate in the problem-solving process at the individual student level.
- Conduct a physical therapy assessment as part of the full and individual evaluation under IDEA.

Suggested Resources

www.rti4success.org

www.rtinetwork.org

www.studentprogress.org

www.learning-styles.online.com

www.thelearningweb.net/personalthink.html

www.ideapartnership.org

References

1. Johnson E, Mellard DF, Fuchs D, McKnight MA. Responsiveness to Intervention (RtI): How to Do It. National Research Center on Learning Disabilities Publication. http://www.nrcld.org/rti_manual/pages/RTIManualIntroduction.pdf. Accessed December 15, 2011.
2. Response to Intervention (RTI) Action Network. What is RtI? <http://www.rtinetwork.org/learn/what/whatisrti>. Accessed December 15, 2011.
3. National Association of State Directors of Special Education (NASDSE) and the Council of Administrators of Special Education (CASE). Response to Intervention: NASDSE and CASE White Paper on RtI. <http://www.nasdse.org/Portals/0/Documents/Download%20Publications/RtIAnAdministratorsPerspective1-06.pdf>. Accessed December 15, 2011.
4. American Occupational Therapy Association. FAQ on Response to Intervention for School-Based Occupational Therapists and Occupational Therapy Assistants. Bethesda, MD: American Occupational Therapy Association; 2008.
5. PL No 108-446, 118 Stat 2647-2808. Individuals with Disabilities Education Improvement Act of 2004. www.copyright.gov/legislation/pl108-446.pdf. Accessed December 15, 2011.
6. US Department of Education. Q and A: Questions and Answers On Response to Intervention (RTI) and Early Intervening Services (EIS). Washington, DC: US Department of Education; 2007. <http://idea.ed.gov/explore/view/p/%2Croot%2Cdynamic%2CQaCorner%2C8%2C>. Accessed December 15, 2011.
7. Reeder DL, Arnold SH, Jeffries LM, McEwen IR. The role of occupational therapists and physical therapists in elementary school system early intervening services and response to intervention: a case report. *Phys Occup Ther Pediatr*. 2011;31(1):44-57. <http://www.ncbi.nlm.nih.gov/pubmed/20735199>. Accessed December 15, 2011.

FOR MORE INFORMATION:

If you have additional questions, would like to order additional copies of this fact sheet, or would like to join the Section on Pediatrics, please contact the Executive Office of the Section on Pediatrics of the American Physical Therapy Association at: APTA Section on Pediatrics, 1111 North Fairfax Street, Alexandria, VA 22314, 800/999-2782, ext 3254. Or visit the Section's website at www.pediatricapta.org.