Problem Solving Model Procedures

Student Services Management Team

Public Schools of Robeson County
Public Schools of Robeson County  
Student Services Management Team  

Student Support Services Checklist

Directions: Checklist should be placed/maintained in student’s cumulative folder.

This student, __________________________________________ has:

<table>
<thead>
<tr>
<th>Please Check</th>
<th>Item Description</th>
<th>Date Implemented</th>
<th>School</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Student Services Management Team Folder (SSMT) (Maintained by SSMT Coordinator)</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>EC Confidential Folder (Active▢) (Inactive▢) (Maintained by EC Department Chairperson)</td>
<td></td>
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<tr>
<td></td>
<td>Section 504 Plan (Maintained by School Section 504 Coordinator)</td>
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<td></td>
<td>Individual Health Care Plan (IHCP) (Maintained by school nurse)</td>
<td></td>
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<td></td>
<td>Emergency Action Plan (EAP) (Maintained in cumulative record)</td>
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<td>Diet Order (Maintained by cafeteria manager)</td>
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<tr>
<td></td>
<td>Crisis Plan (From Provider)</td>
<td></td>
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<td></td>
<td>Authorization for Release of Student Health Information</td>
<td></td>
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<tr>
<td></td>
<td>Behavioral Plan</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Custody Orders - Educational rights - group home must be able to sign for testing - Physical Placement - If DSS has custody, contact to partner for SSMT/504</td>
<td></td>
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</tr>
</tbody>
</table>

Initial SSMT school: __________________________________________  
Student Transfer to: __________________________________________  
Withdrawal Date: __________________________________________
LEVEL I

- (Start 4-6 weeks within knowledge of concern)

-Prior to SSMT
Description of Problem-Solving Model ("PSM") Level I

Purpose of PSM Level I
- Informs parents and teachers of concern
- Establishes communication between school and home
- Attempts initial resolution of the concern

Description of PSM Level I

A teacher with a concern regarding a student’s performance contacts the student’s parents and engages in a consultative process to resolve the presenting problem. General education interventions are implemented at this level and communication between the parents and teacher is opened as parents are informed of initial concerns. Problems are frequently resolved at this level but if problem solving is not successful, other resources within the school (including various support personnel) are utilized and could be included in the problem-solving process.

Level II Problem Solving begins when plans at Level I are not successful, or when either the parents or teacher indicates a need for additional resources.

Typical PSM Level I Activities

1. Define the Student’s Performance Profile
   The teacher and parent meet informally and discuss the student’s performance profile: what the student knows, what he/she should know, and the area(s) to target for instruction/intervention.

2. Develop a Plan
   The teacher and the parent develop the plan. It should be written formally using form PSM-1.

3. Implement the Plan
   The classroom teacher conducts the selected intervention. Information is gathered to indicate the success of the intervention.

4. Evaluate Progress
   Based upon the information gathered the teacher and parent make a decision about the effectiveness of the intervention. They may discontinue the intervention when the area(s) targeted for instruction/intervention is resolved, revise the intervention, or go to PSM Level II if the targeted area continues to be of concern.

PSM Level I Checklist

<table>
<thead>
<tr>
<th>Teacher and Parent Actions at PSM Level I</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Send PSM-1a to Parent</td>
</tr>
<tr>
<td>☐ Hold Parent / Teacher Conference</td>
</tr>
<tr>
<td>☐ Discuss performance and develop a plan to address areas of concern (form PSM 1)</td>
</tr>
<tr>
<td>☐ Provide any materials to parents for home intervention plan</td>
</tr>
<tr>
<td>☐ Implement Level I intervention plan for at least 15 days</td>
</tr>
<tr>
<td>☐ Gather performance data</td>
</tr>
<tr>
<td>☐ Review effectiveness of PSM Level I intervention plan</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Decision Making by Teacher and Parent at PSM Level I</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Intervention plan successful: Discontinue PSM Level I plan</td>
</tr>
<tr>
<td>☐ Revise and/or continue PSM Level I intervention plan</td>
</tr>
<tr>
<td>☐ Move to PSM Level II: Meet with PSM Level II Consultant</td>
</tr>
<tr>
<td>☐ Move to PSM Level III: Meet with PSM Level III Consultant</td>
</tr>
</tbody>
</table>
Forms Directions

Tier I

Tier I (Pages 1-3) are to be completed jointly by Teacher and Parent.

Page 1:
- Complete student information using record review. Provide information to describe demographics of the student and area(s) of concern.

Page 2:
- Describe the skill deficit in observable, measurable terms. Respond to each question to guide the development of a plan.
- Implement the plan and gather data for a period of time determined by Teacher and Parent.
- After implementation of plan and data is gathered, Teacher and Parent conference to discuss data and determine student progress. Conference is documented on Page 2.

Page 3:
- Document decisions about the plan. If modifications are made, describe in the second decision box.
Parent Conference/Contact Summary

Student: ____________________________________________ Teacher: ____________________________

A. First Contact / Attempt
   Date: _______ / _______ / _______
   Person Making Contact: ____________________________ Position: ____________________________
   Type of Contact:
   □ School Conference □ Letter/Note □ Home Visit □ Phone Call
   □ Other: ______________________________________
   Purpose: ______________________________________
   Comments on Conference: ________________________________________________________________

B. Second Contact / Attempt
   Date: _______ / _______ / _______
   Person Making Contact: ____________________________ Position: ____________________________
   Type of Contact:
   □ School Conference □ Letter/Note □ Home Visit □ Phone Call
   □ Other: ______________________________________
   Purpose: ______________________________________
   Comments on Conference: ________________________________________________________________

C. Third Contact / Attempt
   Date: _______ / _______ / _______
   Person Making Contact: ____________________________ Position: ____________________________
   Type of Contact:
   □ School Conference □ Letter/Note □ Home Visit □ Phone Call
   □ Other: ______________________________________
   Purpose: ______________________________________
   Comments on Conference: ________________________________________________________________

D. Fourth Contact / Attempt
   Date: _______ / _______ / _______
   Person Making Contact: ____________________________ Position: ____________________________
   Type of Contact:
   □ School Conference □ Letter/Note □ Home Visit □ Phone Call
   □ Other: ______________________________________
   Purpose: ______________________________________
   Comments on Conference: ________________________________________________________________
Public Schools of Robeson County  
Social and Health History

STUDENT NAME: ___________________ SEX: ___ RACE: ___ DOB: ___ AGE: ___  
SCHOOL: ___________________ GRADE: ___ TEACHER: ___________________  
NCWise ID #: _______________ HOME PHONE: _____________ CELL PHONE: _____________  
ADDRESS: ____________________________________________________________

---

**FAMILY COMPOSITION**

The student lives with: (check) □ biological mother □ biological father □ stepmother □ stepfather □ guardian

Parent/guardians, as listed

**Parent/Legal Guardian Information**
- If guardian, what is their relationship to student? ________________________________
- When was custody awarded? ________________________________
- Explain: ______________________________________________________________
- Does biological mother have visitation? □ yes □ no How often? ________________________
- Does biological father have visitation? □ yes □ no How often? ________________________
- If parents are separated or divorced, when did this happen? ________________________
- What type of custody do the parents have? □ joint □ mother has sole custody □ father has sole custody

**Employment/Education**

Mother’s Place of Employment: ____________________________________________ Work Phone: ___________________ Ext/Dept. ________________
Mother’s Education: HS Diploma □ yes □ no If no, explain __________________________
Father’s Place of Employment: ____________________________________________ Work Phone: ___________________ Ext/Dept. ________________
Father’s Education: HS Diploma □ yes □ no If no, explain __________________________

**Other adults/children in home (Group/Foster/Therapeutic Homes list first name only)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Sex</th>
<th>Age</th>
<th>Grade/School</th>
<th>Relationship to Student</th>
</tr>
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<tbody>
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Does the student have any siblings that do not live in the home?  

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<thead>
<tr>
<th>Name</th>
<th>Sex</th>
<th>Age</th>
<th>Grade/School</th>
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<td>4.</td>
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**MEDICAL HISTORY**

Parental History  
Did the mother receive regular prenatal care? □ yes □ no At what month did prenatal care begin? __________________________
Medications used during pregnancy: List: __________________________
Check any of the following complications that occurred during pregnancy:
- Difficult conception
- Excessive vomiting
- Emotional Stressors
- Anemia
- Abnormal weight gain
- Postpartum depression
- High blood pressure
- Measles
- Vaginal bleeding
- Toxemia
- Maternal Injury
- Flu
- Cigarettes/tobacco use
- Alcohol use
- Other
- Hospitalization

**Birth History**
Mother's age at birth: _____ Father's age at birth: _____ Length of pregnancy (weeks): _____ Birth weight: _____

Type of delivery (check): □ Vaginal □ Cesarean Section □ Scheduled □ Emergency
Explain: ____________________________________________________________

Check the following complications that occurred during birth:
- Forceps
- Breech
- Labor Induced
- Other: ________________
- Jaundiced
- Bilirubin Lights: If so, how long? ________________
- Breathing problems at birth: Explain: ________________________________

**Development**
How old was your child when he/she began:
- Lift Head: _____ Roll Over: _____ Sit up: _____ Crawl: _____ Pulling up to Stand: _____
- Walking: _____ Saying single words: _____ Bladder Trained: _____ Bowel Trained: _____

Has your child experienced any of the following problems? (If yes, please describe)
- Feeding
- Separation from parents
- Under/over weight
- Bedwetting or bowel accidents
- Diabetes
- Ear Infections
- Colic
- Seizures
- Broken bones
- Serious burns
- Hospitalizations
- Surgery
- Head Injury
- Asthma
- Other

**Current Medical Information**
- Name of your child’s pediatrician __________________________ Telephone __________
- Your child’s current health status: _____________________________
- Does your child have any current diagnosis? ____________________
- Eyeglasses/contacts: □ yes □ no Date of last screening: ____________ Dr: __________
- Hearing Problem: □ yes □ no Date of last screening: ____________ Dr: __________
- Medication(s) for long periods: □ Yes □ No
<table>
<thead>
<tr>
<th>Date</th>
<th>Medication/Dose</th>
<th>Reason</th>
<th>Name of Doctor</th>
</tr>
</thead>
</table>
  1.    |                  |        |                |
  2.    |                  |        |                |
  3.    |                  |        |                |
- How well does your child sleep? ____________________________ Number of hours per night: ______

**Family Medical History**
Have any family members had any of the following? (Please specify the relationship to the student)
(Key: GMA-Grandmother GFA-Grandfather A-Aunt U-Uncle S-Sister B-Brother)
- Autism __________________________ Mental Illness __________________________
- ADD/ADHD __________________________ Mental Retardation __________________________
- Diabetes __________________________ Learning Disabilities __________________________
- Seizure or Epilepsy __________________________ Alcohol/Drug abuse __________________________
SOCIAL/BEHAVIORAL/EMOTIONAL

- What is your biggest worry about your child at this time?  
- When was it first noticed?  
- What do you like about your child (please name at least three)?  
- Is there an area for improvement or concern?  
- What are your child’s favorite activities? (name at least three)  
- What do you see in the future for your child?  
- Professionals/agencies (outside of school) working with the student (therapy, tutoring, Juvenile Justice, DSS):  
  Agency name:  
  Contact Person:  
  Phone:  
  Agency name:  
  Contact Person:  
  Phone:  
  Agency name:  
  Contact Person:  
  Phone:  
- Has a Release of Information Form been obtained: □ yes □ no

Social

- Is your child a leader or a follower?  
- Does your child typically play with older or younger children?  
- Does your child belong to a social group like sports, church, and scouts?  
  Explain:  
- How does your child get along with peers?  
- How well does your child get along with : (check as appropriate)

<table>
<thead>
<tr>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father/Stepfather</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother/Stepmother</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brother/Stepbrother</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sister/Stepsister</td>
<td></td>
<td></td>
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<tr>
<td>Other Adults</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Behavioral

- Does your child have behavior problems at home? □ yes □ no  
  Explain:  
- Does your child have a behavior problem away from home? □ yes □ no  
  Explain:  
- Do you think your child is overly active? □ yes □ no  
  Explain:  
- Does your child have a short attention span/fail to complete tasks? □ yes □ no  
  Explain:  
- Does your child overreact? □ yes □ no  
  Explain:  
- Describe the type of discipline that works best:  

Emotional

- Describe your child’s overall mood?  
- Are there any significant family changes/problems that could be upsetting your child?  
  □ separation □ divorce □ parent/family incarceration □ terminal illness □ death □ new live-in partner  
  □ new stepparent □ family financial crisis □ recent move □ other  

Notes:  


Student Name: ___________________________ NCWise No. _______________________

- Has your child ever witnessed or experienced violence? □ yes □ no
  If yes, Explain: ____________________________________________________________
- Has your child expressed suicidal ideation? □ yes □ no When? ________________
  If yes, Explain: ____________________________________________________________
- What was done as a result? ________________________________________________

SCHOOL HISTORY

- Where did your child attend school (please indicate all schools)
  Pre K _________  4 _______________  9 _______________
  K ____________  5 _______________  10 _____________
  1 ______________  6 _______________ 11 _____________
  2 ______________  7 _______________ 12 _____________
  3 ______________  8 ______________
- Did your child have adjustment/separation problems upon starting school? □ yes □ no
  Explain: _________________________________________________________________
- Were there problems in any grade (social, academic, behavior, attendance): □ yes □ no
  Explain: _________________________________________________________________
- Describe any concerns you have for your child at school: __________________________
- Has your child ever been retained? □ yes □ no What grade? ________________
- Has your child ever been suspended (in, out, bus)? □ yes □ no What school? ______
- Has your child ever been evaluated for Exceptional Children Services (special ed, AG)? □ yes □ no
  When? __________ By whom? __________ Explain: ______________________________
- Has your child ever attended any special classes? □ yes □ no What grade? ________
  What school? ____________________ What class(es)? ___________________________
- Does/did your child have an IEP? □ yes □ no When? ______ What school? __________

RECOMMENDATIONS

What do you think the school can do to help your child? __________________________

What do you think you can do to help your child? ________________________________

Teacher comments: _________________________________________________________

PARENT CONSENT FOR USE OF INFORMATION

I release this information for the purpose of evaluation and/or intervention planning □ YES □ NO

Parent Signature: ___________________________ Date: ___________________________

Teacher Signature: ___________________________ Date: ___________________________
NC Department of Public Instruction
Level I Problem-Solving Parent Notification

LEA: ___________________________ School: ___________________________

Date: __________________________ Re: ___________________________

Dear: __________________________:

We plan to begin a screening process for ___________________________ so that we can better understand his/her instructional needs and offer suggestions about ways to address those needs. The screening process may include one or more of the following:

1. Use of various classroom interventions
2. Vision, hearing screening
3. Classroom observation
4. Review of school records
5. Speech-language screening
6. Curriculum-Based Measures (CBM)
7. Informal reading, math and/or written language inventories

After screenings are completed, we would like to meet with you to discuss his/her school performance. If we determine additional assistance is needed for your child to be successful in school, we would like your assistance in developing an intervention plan. Your involvement is very important. The instructional plan will include activities to do at home as well as at school. Those activities will allow your child to have more practice on skills he/she needs to be successful.

If you have any questions please contact ___________________________
at __________________________.

Thank you for all you do. We look forward to working with you to help your child be successful.

Sincerely,

______________________________
Principal/Designee

Encl.

Revised 3/09
<table>
<thead>
<tr>
<th>Student Name:</th>
<th>NCWISE/SIMS#</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher:</td>
<td>DOB:</td>
<td>Grade:</td>
</tr>
</tbody>
</table>

### Attendance for last five years

<table>
<thead>
<tr>
<th>Present/Enrolled</th>
<th>Grade Level</th>
<th>Grade Level</th>
<th>Grade Level</th>
<th>Grade Level</th>
<th>Grade Level</th>
</tr>
</thead>
</table>

### Area(s) of Concern (attach PEP or Instructional Consultation Student Documentation Form, if available)

#### Language Arts
- Phonemic Awareness
- Word Identification
- Sight Word Vocabulary
- Reading Comprehension
- Reading Fluency
- Written Expression
- Writing Mechanics
- Writing Conventions
- Other

#### Mathematics
- Basic Math Facts
- Computation
- Problem-Solving
- Word Problems
- Geometry
- Measurement
- Probability/Data
- Analysis
- Other

#### Behavior
- Noncompliance
- Motivation
- Attention span
- Peer relationships
- Withdrawn/moody
- Overactive
- Verbally aggressive
- Physically aggressive
- Other

#### Other
- Medical (area: ____________)
- Motor Skills
- Speech-Language
- Social Skills
- Withdrawn/Moody
- Anxiety
- Vision
- Hearing
- Other

### Current Levels

<table>
<thead>
<tr>
<th>Reading</th>
<th>Math</th>
<th>Writing</th>
</tr>
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<tbody>
<tr>
<td>Grade ____</td>
<td>Grade ____</td>
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</tbody>
</table>

### EOG Scores

| Grade ____ | Grade ____ | Grade ____ |

### Date of Vision Screening:

Results:

Far: ________ Near: ________

### Date of Hearing Screening:

Results:

### Name and Address of Parent/Guardian

### Services Received:

- Small Group Instruction
- Individual Instruction
- Counseling
- Title I
- 504 Accommodations
- Community Services
- ESL/LEP/ELL
- Occupational Therapy
- Speech/Language Therapy
- Physical Therapy
- Reading Lab
- Math Lab
- Tutoring
- Other (please specify: ________)

### Additional Comments/Information/Teacher Observations

Revised 5/08
## Tier I Problem-Solving

**Student Name:**

**DOB:**

**Date:**

**NCWISE/SIMS#**

### Describe Parental Concerns/Involvement in Plan Development:

### Define the problem (What's the problem?)

### Problem Analysis (Why is the problem occurring?) Hypothesis

### Plan Development and Implementation (Specify the instructional strategy, including a measureable goal statement. Implementation specifics: Who? When? Where?)

### Evaluation (Did it work?)

### How is the student performing in comparison to his/her peers?

### Baseline (current level of performance):

### Benchmark (desired level of performance):

### Instructional Plan Results: (Did it work) Attach Progress Monitoring Data

### Beginning Implementation Date:

Revised 5/08
<table>
<thead>
<tr>
<th>Decision:</th>
<th>Date of Decision:</th>
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</thead>
<tbody>
<tr>
<td>□ Continue Instructional Plan</td>
<td>□ Modify Plan</td>
</tr>
<tr>
<td>□ Discontinue Plan</td>
<td>□ Move to PSM Tier II</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Rationale for Decision:</th>
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<table>
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<tr>
<th>Meeting Notes:</th>
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</table>
Parent Referral to Student Support Team

Student’s Full Name: _______________________________ Date of Birth: ___________

School: ___________________________ Teacher: ___________________________ Grade: ___________

Parents/Guardians: _______________________________ Phone: ___________________________

Why are you referring your child to the SSMT Team?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

How long has your child had these problems?
____________________________________________________________________________________

What types of problems do you see at home?
____________________________________________________________________________________

What specific questions would you like to have answered?
____________________________________________________________________________________
____________________________________________________________________________________

Has your child been evaluated for, or received special education services in the past? If yes, explain.
____________________________________________________________________________________
____________________________________________________________________________________

Has your child ever had an evaluation by a private psychologist? _____________ If yes, explain.
____________________________________________________________________________________
____________________________________________________________________________________

Is there any other information about your child that you would like to share?
____________________________________________________________________________________
____________________________________________________________________________________

____________________________________________________________________________________

_________________________________________________________  ___________________________  _____________
Signature  Relationship to Child  Date
LEVEL II
Timeframe → 4 – 6 weeks
Description of Problem-Solving Model ("PSM") Level II

Purpose of PSM Level II

- To gather data about an area targeted for instruction/intervention
- To re-define the area of concern
- To develop/monitor new plans to increase performance in area of concern
- To get help from other teachers
- To examine how targeted area(s) impairs student functioning

Description of PSM Level II

When a parent and teacher are not successful at increasing performance to an acceptable level in area(s) of concern or that targeted area is determined to be too significant to address at PSM Level I, additional resources are sought. Many schools have created teams of teachers and other school personnel that function as a source of assistance to teachers, parents, and students. These teams can be referred to by a variety of names such as Student Success Teams, Teacher Assistance Teams, or Problem-Solving Teams. These teams engage in the problem-solving process by defining a student's performance profile, analyzing areas of concern, generating solutions to address concerns, and designing interventions for implementation in the classroom. The teams consist of the child's parents and teacher, other teachers in the school, and support staff (i.e. guidance counselor). Central Administrative staff or the student may also participate on the team. They provide informal consultation and assistance, but they are not directly involved with development, implementation, or monitoring of the intervention. If more involvement is needed by central administrative staff at this time, or if the area of concern is considered too significant to address without additional resources, the concern should be directed to the PSM Level III Team.

Typical RTI Level II Activities

1. Describe the Student's Performance Profile

During PSM Level II, a Consultant from the PSM Level II Team talks with the child's teacher and parent about the child's functioning and gathers information such as vision, hearing, health, and attendance. Through discussion with the parent and teacher, the Consultant further defines the student's performance profile. Screening information confirms the existence of discrepant academic skills or behavior compared to other children. It also rules out any medical or physiological deficit that may be impacting the problem. This screening process helps estimate the severity of the area(s) of concern.

2. Develop a Plan

A PSM Level II Consultant then works with the teacher and parent to develop strategies that the classroom teacher can use to address the problem. Parents and teacher agree upon a reasonable intervention by listing possible solutions based on information from the data collected. Strategies are developed that offer solutions that have a reasonable probability of success based on professional expertise and knowledge of effective practice. Solutions should be feasible and acceptable to the teacher and be able to be implemented with integrity. A PSM Level II intervention plan should include
specific procedures and strategies, person(s) responsible, objectives with specific criteria, methods of measuring outcomes, date(s) in which activities will occur, and documentation of parental participation.

3. Implement the Plan
The teacher and other responsible individuals implement the intervention. At this level, collection of data on a regular basis is useful for decision-making. Data collection methods that do not require outside assistance are most feasible at this level.

4. Evaluate Progress
If the student’s performance does not improve at an acceptable rate, the general education intervention is modified. This process recycles as often as needed or the team may decide to move to PSM Level III if: an ongoing review indicates that change has not occurred at desired rates; parents request involvement of additional resources; or the team desires assistance in gaining new knowledge regarding the identified area of concern. The following are indicators of when to consider moving from PSM Level II to PSM Level III:

- Anytime the PSM Level II Team determines a need for more assistance to determine the appropriate resources for a student
- Anytime a “red flag” appears. A sample list of red flags (indicators of a need for intensive interventions) is included on the next page
- If given the current plan, the student is not making anticipated progress and more assessment data is needed to determine the instructional changes that are needed. Teams are cautioned not to wait too long until problems become very severe and stressful for the student or individuals implementing the interventions

Sample “Red Flags” for moving to PSM Level III

- Student moves in from another district or area with interventions / services provided in the past
- Student moves in and appears to have had very different instruction, has significant gaps in learning, or comes from an area with different standards
- More specialized assessment data is needed to determine the cause of the problem
- Student has been referred to the PSM Team a number of times and specific strategies or specific instruction has been provided
- Student has had significant medical trauma or mental health concerns or issues
- Below 10th percentile on standardized tests such as ITBS or CBM
- Student requires excessive individualized instruction, re-teaching, and 1-on-1 assistance
- Student does not meet grade level standards and benchmarks in more than one academic area
- Student appears unable to participate in any academic activities
- Student is potentially harmful to self or others
- Behavior consistently interferes with learning of self or others in the classroom
- Behavior significantly disrupts classroom functioning
- Severe behavior problems have been seen over time
- Disciplinary / office referrals occur on a regular basis

### PSM Level II Checklist

<table>
<thead>
<tr>
<th>Consultant, Parent, and Teacher Actions at PSM Level II</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Teacher meets with a PSM Level II Consultant</td>
</tr>
<tr>
<td>☐ PSM Level II file is opened</td>
</tr>
<tr>
<td>☐ Hold third Parent / Teacher Conference with PSM Consultant</td>
</tr>
<tr>
<td>☐ Write PSM Level II Intervention Plan (form PSM-2)</td>
</tr>
<tr>
<td>☐ Provide any materials to parents for home intervention plan</td>
</tr>
<tr>
<td>☐ Implement Level II intervention plan for at least 15 days</td>
</tr>
<tr>
<td>☐ Document Progress during intervention</td>
</tr>
<tr>
<td>☐ Review effectiveness of Level II plan after 15 school days</td>
</tr>
</tbody>
</table>

### Decision Making by Consultant, Parent, and Teacher

- ☐ Level II intervention plan successful: Return to Level I
- ☐ Revise and/or continue PSM Level II intervention plan
- ☐ Move to PSM Level III
Tier II

Tier II (Pages 1-2) are to be completed by Teacher, Parent and a team of other school personnel.

Page 1:
- Describe the skill deficit in observable, measurable terms. Respond to each question to guide the development of a plan.
- Implement the plan and gather data for a period of time determined by Teacher, Parent and team. Conference is documented on Page 1

Page 2:
- After implementation of plan and data is gathered, Teacher, Parent and team confer to discuss data and determine student progress. Conference is documented on Page 2.
- Document decisions about the plan. If modifications are made, describe in the second decision box.
Public Schools of Robeson County

Student Services Management Team

Programs for Exceptional Children

REQUEST FOR HEALTH SCREENING

**** PLEASE PLACE IN THE NURSE'S BOX AT THE SCHOOL ****

Date: ____________________

Name of School: ____________________________________________

Individual Requesting Health Screening: _________________________

Student’s Name: ____________________________________________

DOB: ___________________ Grade: ___________ Sex: ___________

Regular Classroom Teacher’s Name: ____________________________
NC Department of Public Instruction
Tier II Problem-Solving Parent Invitation

LEA: ________________________________

School: ________________________________

Address: ________________________________

Phone Number: ________________________________

DATE: ________________________________

TO: Parent, Guardian, or Surrogate Parent

FROM: Tier II Problem-Solving Consultant

PROGRESS OF: ________________________________

Student's Name

A TIER II PROBLEM-SOLVING TEAM MEETING HAS BEEN SCHEDULED FOR:

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
</table>

You are invited to attend. The Tier II Problem-Solving Team meets on a regular basis to offer assistance to students, teachers and parents regarding students' success in school. We would like to discuss your child's progress at this upcoming meeting.

The following people are scheduled to attend:

________________________________________

________________________________________

________________________________________

________________________________________

Our goal is for each child to have a successful school experience. Please feel free to call me at ___________________________ if you have any questions.

cc: Persons scheduled to attend
PUBLIC SCHOOLS OF ROBESON COUNTY
HEALTH SCREENING

Student Name: ___________________________ DOB: ____________ Sex: M ___ F ___

School: ___________________________ Teacher: ______________ Grade: ______

VISION SCREENING:

☐ Without Glasses  ☐ With Glasses

<table>
<thead>
<tr>
<th>Distance</th>
<th>Date Tested</th>
<th>Right Eye</th>
<th>Left Eye</th>
<th>Both Eyes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Far</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Near</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

☐ Within Normal Limits  ☐ Referred

Comments:

________________________________________________________________________
________________________________________________________________________

School Nurse Signature _______________ Date ____________

HEARING SCREENING:

Date Tested: _________ Intensity Level: 20 dB

<table>
<thead>
<tr>
<th></th>
<th>Right Ear</th>
<th>Left Ear</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1000 Hz</td>
<td>2000 Hz</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

☐ Within Normal Limits  ☐ Referred

Comments:

________________________________________________________________________
________________________________________________________________________

School Nurse Signature _______________ Date ____________

Additional Comments:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

School Nurse Signature _______________ Date ____________
# NC Department of Public Instruction
## Problem-Solving Model Classroom Observation

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Grade:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher:</td>
<td>School:</td>
<td></td>
</tr>
<tr>
<td>Observer:</td>
<td>Observer's Title:</td>
<td></td>
</tr>
<tr>
<td>Number of Teachers Present:</td>
<td>Number of Students:</td>
<td>Time of Day:</td>
</tr>
</tbody>
</table>

### Subject Observed (please check one subject)

- [ ] Art
- [ ] Language
- [ ] Music
- [ ] Reading
- [ ] Computers
- [ ] Library
- [ ] Physical Education
- [ ] Science
- [ ] Free Time
- [ ] Mathematics
- [ ] Recess
- [ ] Social Studies

### Learning Situation (please check all that apply)

- [ ] Regular Classroom
- [ ] Single teacher
- [ ] Self-contained classroom
- [ ] Multiple teachers in room
- [ ] Homeroom grouping
- [ ] Direct instruction (lecture)
- [ ] Ability grouping
- [ ] Cooperative learning (group)
- [ ] Whole class
- [ ] Independent work
- [ ] Small group
- [ ] One-on-one tutor/assistance

### Student Behaviors Observed (please check all that apply)

- [ ] Aggressive toward children
- [ ] Controls discussions
- [ ] Easily distracted
- [ ] Sits quietly
- [ ] Asks for help
- [ ] Daydreams
- [ ] Easily frustrated
- [ ] Speech problems
- [ ] Attentive
- [ ] Demands excessive attention
- [ ] Friendly
- [ ] Talks excessively
- [ ] Avoids eye contact
- [ ] Difficulty copying from board
- [ ] Immature behavior
- [ ] Talks out of turn
- [ ] Avoids groups
- [ ] Disorganized work habits
- [ ] Neat appearance
- [ ] Trouble finding place
- [ ] Careless mistakes
- [ ] Displays leadership ability
- [ ] Obscene/inappropriate speek
- [ ] Unusual language
- [ ] Completes work on time
- [ ] Disruptive
- [ ] Overactive, restless
- [ ] Withdrawn
- [ ] Constantly out of seat
- [ ] Does not complete tasks
- [ ] Perseverates/repeats behavior
- [ ] Works well by self
- [ ] Contributes to class discussion
- [ ] Does not follow directions
- [ ] Short attention span
- [ ] Works well with others

### Learning Environment (please check only one description for each environmental factor)

- [ ] Classroom Design: Traditional four-wall & door
- [ ] Classroom lighting: Bright
- [ ] Scating arrangement: Rows facing front
- [ ] Student placement: Back/middle of room
- [ ] Temperature: Hot/stuffy
- [ ] Noise levels: Quiet
- [ ] Other
- [ ] Open/pod design
- [ ] Moderate
- [ ] Desk groupings
- [ ] Front of room
- [ ] Comfortable
- [ ] Near teacher's desk
- [ ] Chilly
- [ ] Other
- [ ] Inadequate
- [ ] U-shaped facing front
- [ ] Other
- [ ] Infrequently
- [ ] Teacher-initiated
- [ ] Clear and understandable
- [ ] Voluntary
- [ ] Teacher-organizes
- [ ] Frequently
- [ ] Slow
- [ ] Difficulty expressing self
- [ ] Interrupts teacher
- [ ] Interrupts peers
- [ ] With prompting
- [ ] Spoke softly
- [ ] Ignores teacher
- [ ] Ignores peers
- [ ] Blurted out-of-turn
- [ ] Off the subject of discussion
- [ ] Attention seeking
- [ ] Enjoys argument/goading
- [ ] Off the subject of discussion
- [ ] Attention seeking
- [ ] Enjoys argument/goading

Other Significant Student Behaviors or Student/Teacher Interactions (use back of this form if necessary)
# PSM Teacher Narrative

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Grade:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOB:</td>
<td>NC WISE #:</td>
<td>Parent:</td>
</tr>
<tr>
<td>Teacher:</td>
<td>School:</td>
<td></td>
</tr>
</tbody>
</table>

Teachers’ clinical observations regarding the student’s current academic, social, and behavioral performance provide crucial information regarding the student’s strengths and weaknesses. To better assess the student’s needs, please write in narrative form a summary of the student’s overall performance in your classroom. Be sure to include any and all interventions you have used with the students in relation to the area(s) targeted for instruction/intervention.

## Academic, Behavioral, Social, and Emotional Observations

Please describe your observation in narrative or bullet format

---

Teacher’s Signature:
<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Grade:</th>
<th>DOB:</th>
<th>NCWISE/SIMS#:</th>
<th>Meeting Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Problem Identification/Definition (What is the problem?)

Problem Analysis/Hypothesis (Why is the problem occurring?)

Baseline/Benchmark Data: (Student’s current performance/Expected Performance)

Plan Development and Implementation (Specify the instructional strategy, including a measureable goal statement. Implementation specifics: Who? When? Where?)

Meeting Notes:

Decision date:

Revised 5/08
NC Department of Public Instruction  
Tier II Problem-Solving

<table>
<thead>
<tr>
<th>Name:</th>
<th>DOB:</th>
<th>NCWISE/SIMS#</th>
</tr>
</thead>
</table>

Results of Plan Implementation (attach Progress Monitoring data):  

Plan Evaluation (Did it work?)

<table>
<thead>
<tr>
<th>Decision</th>
<th>Date of Next Meeting (or N/A):</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Continue Intervention</td>
<td>☐ Modify Intervention*</td>
</tr>
</tbody>
</table>

* Specify Modification to Instructional/Intervention Plan:

Meeting Notes:

Meeting Attendees:

<table>
<thead>
<tr>
<th>Decision</th>
<th>Date of Next Meeting (or N/A):</th>
</tr>
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</tr>
</tbody>
</table>

* Specify Modification to Instructional/Intervention Plan:

Meeting Notes:

Meeting Attendees:

Revised 5/08
NC Department of Public Instruction
Tier II Problem-Solving Parent Invitation

LEA: ____________________________________________

School: __________________________________________

Address: __________________________________________

_________________________________________________

Phone Number: ______________________________________

DATE: ____________________________________________

TO: ________________________________________________

Parent, Guardian, or Surrogate Parent

FROM: ______________________________________________

Tier II Problem-Solving Consultant

PROGRESS OF: _____________________________________

Student's Name

A TIER II PROBLEM-SOLVING TEAM MEETING HAS BEEN SCHEDULED FOR:

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<tr>
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<th>Time</th>
<th>Location</th>
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</table>

You are invited to attend. The Tier II Problem-Solving Team meets on a regular basis to offer assistance to students, teachers and parents regarding students' success in school. We would like to discuss your child's progress at this upcoming meeting.

The following people are scheduled to attend:

__________________________________________________

__________________________________________________

__________________________________________________

__________________________________________________

Our goal is for each child to have a successful school experience. Please feel free to call me at __________________________ if you have any questions.

cc: Persons scheduled to attend
Description of Problem-Solving Model ("PSM") Level III

Purpose of PSM Level III Problem Solving
- Provides additional support from administrative staff
- Assists teacher(s) in gaining new knowledge regarding the identified concern
- Requires in-depth analysis/assessment and further data collection
- Document plans & assist with ongoing data collection
- Measures effectiveness of intervention plans
- Assists with decision making and making instructional changes in the classroom
- Determines need for additional resources

Description of PSM Level III

When an area of concern is complex in nature, it may require additional resources. Support personnel such as school psychologists, educational consultants, school social workers, and direct service personnel (i.e., speech-language pathologists, occupational therapists, physical therapists, and early childhood specialists) may be asked to participate on the problem-solving team. The intent continues to be the provision of interventions in order to help the student perform successfully in the general education environment. A Consultant from the PSM Level III Team will act as the primary case manager and will assist with documentation, intervention design, implementation, and follow-up. Reviews, interviews, observations and testing will be done to further define and analyze the area of concern. Interventions are designed and data are gathered frequently to evaluate effectiveness.

Parent input continues to be a critical component at PSM Level III. As illustrated earlier, PSM Levels II and III of this model are connected. There is, however, a primary distinction between PSM Levels II and III. At Level III, more specialized personnel are significantly involved as members of the extended PSM Level III Team.

Typical PSM Level III Activities

1. Define the Student's Performance Profile
   At Level III, the PSM Team reviews all information. Several activities are completed to fully define the area(s) of concern.
   
   Identify Area of Concern: Derive a general description of the concern or the current difficulty the student is having. All concerns are noted at this time, but if there are concerns in multiple areas, these concerns should be prioritized and a target area selected.

Define the Area(s) of Concern: Define the area(s) of concern in concrete, observable terms. This definition should be clear and recognizable by observers and should include examples of the concern(s).

Validate the Area(s) of Concern: This requires the use of a standard so that comparisons can be made between what the student is actually able to do compared to what is expected. This serves as the foundation for determining a discrepancy and the magnitude of the concern.

Analyze the Area Targeted for Instruction/Intervention: Assessment questions are formulated to find out what we need to know to design an intervention plan. This includes looking at the domains of instruction, curriculum, environment, and the learner. A hypothesis is generated. This hypothesis attempts to establish an assumed cause for the area of concern and answer the question, "Why is the student performing at a level of concern?" Predictions about what will increase the student’s performance in the area(s) of concern are made and assessment procedures are used for validation until an intervention is indicated.

Write a Performance Statement: The performance statement includes a specific area of performance, a description of the dimensions of that area, a description of the setting dimensions, and a statement describing the discrepancy and its significance.

2. Develop a Plan
   The PSM Level III Team develops a written intervention plan based on the assessment data that has been gathered up to this point.

Generate Possible Solutions: This step requires the team to use the information gathered from the analysis of the area targeted for instruction/intervention. Based on the hypothesis and validated prediction, the team should have specific guidance as to what intervention has the highest likelihood of success.

Evaluate the Solutions: Potential solutions should consider alterable variables, feasibility, teacher skills, and the likelihood of success. Resources to conduct the intervention must be considered and a solution must be selected that is reasonable within the general education environment. If special education resources are to be used, very short focused involvement should be planned.

Select a Solution: When selecting reasonable solutions, it is important to take into account the feasibility that the teacher can or will implement the plan with integrity. Plans that cannot be implemented the way they were designed will not generate much, if any, usable information for decision making at a later time.
Collect Baseline Data: A measurement strategy for collecting data should be identified and used to measure performance in the area of concern. Repeated collection of pre-intervention data will be useful in future problem analysis and intervention design.

Set a Goal: Write a goal including the time frame, conditions, performance, and criterion. Previous data should be considered utilizing a standard to establish expected progress (i.e., peer performance, teacher expectations, realistic/ambitious growth rates).

Write an Intervention Plan: The intervention plan should clearly identify procedures and instructional strategies to be used. Arrangements such as where and when the plan will be implemented and the materials needed to carry out the plan should be delineated. Persons responsible for all aspects of the plan are identified. It is essential that this plan is written and available to all individuals involved in the implementation of the plan.

Select Measurement Strategy: The measurement strategy employed previously should again be utilized with methods of data collection, measurement conditions, and a clearly identified monitoring schedule.

Develop a Plan to Evaluate Effectiveness: A decision-making plan with frequent data collection should be identified also with strategies for summarizing the data for evaluation. The number of data points or length of time before data analysis occurs should be agreed upon and a decision rule should be selected to guide the team in determining the need for instructional changes.

3. Implement The Plan
The intervention plan should be implemented as designed with modifications based on data analysis and in collaboration with other implementers. Implementation of the plan will require ongoing support, technical assistance, resource linking, design review, troubleshooting, positive reinforcement for the implementers, and data collection and/or analysis. All implemented plans should be progress monitored.

Progress monitoring includes regular and frequent data collection with recording/graphing of the results. Data should be systematically analyzed so that modifications may be implemented as needed. There should also be a planned review of the results to formulate conclusions and outcome decisions.

4. Evaluate Progress
To determine the intervention's effectiveness, the decision-making plan should be used at the identified frequency. It is important to consider not only the student's level of performance, but also consider the rate of the student's progress. Possible outcomes when evaluating an intervention include:

- The student is making progress toward the goal, but continues to need the intervention in order to maintain the current rate of progress.
- The student is not making progress at the rate expected and the plan needs to be revised or modified in order to obtain the expected rate of progress. The purpose of ongoing, frequent progress monitoring is to provide the necessary data for making instructional changes when they are warranted. A successful intervention may have multiple phases as changes (based on data) are made. It may also be determined that entitlement to special education should be considered.
- One other possible outcome may be that the intervention is successful but the resources needed to maintain the intervention are beyond what can be reasonably continued in general education. This may also warrant consideration for special education.

When an ongoing review of performance in the area of concern indicates change has occurred more slowly than needed to "close the gap" with peers or when resources needed for treatment plans are more than can be expected solely through general education, it is time to consider moving to Level IV and entitlement. It is important to note that if entitlement for special education is under consideration, except in few rare cases, an intervention of Level III specificity is used.
# Problem-Solving Model Level III

Consultation with SSMT:

1. **Define the Student’s Performance Profile**
   What does the student know; what should the student know; what is the discrepancy between these two?

   - Identify area of concern
   - Clearly define the area of concern
   - Validate performance in area of concern
   - Analyze the area targeted for instruction/intervention
   - Write a performance statement

4. **Evaluate**
   - Data analyzed to determine effectiveness
   - Success determined by rate of progress and size of discrepancy
   - Recycle or determine need to consider entitlement for special education

   **TEACHER and PARENT**
   - Develop possible solutions
   - Evaluate solutions
   - Select a solution
   - Collect baseline data
   - Set a goal
   - Write action plan
   - Select measurement strategy
   - Develop plan to evaluate effectiveness

3. **Implement the Plan**
   - Implement according to written plan
   - Ongoing systematic data collection
   - Follow-up as needed

## PSM Level III Checklist

<table>
<thead>
<tr>
<th>Parent, Teacher, and SSMT Actions during Level III</th>
<th>SSMT Member(s) Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ PSM Level III Consultant schedules student for discussion at team meeting</td>
<td>Teacher</td>
</tr>
<tr>
<td>☐ PSM Level III paperwork is added to student file</td>
<td>Teacher</td>
</tr>
<tr>
<td>☐ PSM Level III Chair ensures all Level I/II paperwork and procedures are complete</td>
<td>SSMT Chairperson</td>
</tr>
<tr>
<td>☐ Complete Classroom Observation</td>
<td>SSMT Chairperson</td>
</tr>
<tr>
<td>☐ Complete Teacher Narrative Observation</td>
<td>Teacher</td>
</tr>
<tr>
<td>☐ Define the Student’s Performance Profile</td>
<td>SSMT</td>
</tr>
<tr>
<td>☐ Develop an Assessment Plan</td>
<td>SSMT</td>
</tr>
<tr>
<td>☐ PSM Level III Chair schedules student for discussion at team meeting</td>
<td>SSMT Chairperson</td>
</tr>
<tr>
<td>☐ Parents are invited using PSM</td>
<td>SSMT Chairperson</td>
</tr>
<tr>
<td>☐ Analyze the Assessment Plan</td>
<td>SSMT</td>
</tr>
<tr>
<td>☐ Generate a Goal Statement</td>
<td>SSMT</td>
</tr>
<tr>
<td>☐ Develop an Intervention Plan</td>
<td>SSMT</td>
</tr>
<tr>
<td>Decision Making by SSMT</td>
<td>SSMT Member(s) Responsible</td>
</tr>
<tr>
<td>-------------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>□ PSM Level III intervention plan successful: Return to PSM Level II or discontinue</td>
<td>SSMT</td>
</tr>
<tr>
<td>□ Not enough data gathered: Continue PSM Level III intervention plan</td>
<td>SSMT</td>
</tr>
<tr>
<td>□ Revise and continue PSM Level III intervention plan</td>
<td>SSMT</td>
</tr>
<tr>
<td>□ Move to PSM Level IV</td>
<td>SSMT</td>
</tr>
</tbody>
</table>

- □ Provide any materials to parents for home intervention plan
- □ Implement Level III intervention plan for 15 - 30 school days
- □ Document using PSM
- □ PSM Level III Chair schedules student for discussion at team meeting
- □ Parents are invited using PSM

**Analyze the Intervention Plan**

- SSMT

**Team reviews effectiveness of Level III intervention plan**

- SSMT

**Teacher**

- Teacher

**SSMT Chairperson**

- SSMT Chairperson
Tier III

Tier III (Pages 1-5) are to be completed by Case Coordinator or Classroom Teacher, with input from the Problem Solving Team.

Page 1:
- These are domains to consider when developing a new/revised hypothesis. Tier I & II interventions/outcome data should be used as much as possible (depending on the quality and selection of interventions).
- Determine what/if additional data is needed and how it will be collected and time frame for review.

Page 2:
- The team should consider the appropriateness of long-term goals. Short-term goals should be considered when long-term goals are unrealistic given the intervention time-frame. The goal statement is determined by subtracting the student’s baseline performance from the short-term or long-term objective.
- Short-term data is child specific data. Long-term data is state, local, or research norms.
- Use page one and the top portion of page 2 to formulate a hypothesis and goal statement.

Page 3:
- Develop a comprehensive intervention plan.

Page 4:
- Use the Progress Monitoring Form to collect the intervention data.

Page 5:
- Analyze data to determine the effectiveness of the intervention plan. Subtract the student’s current level of performance from the baseline to determine if the performance goal was met. Subtract the student’s current level of performance from the benchmark to determine a need for continued intervention.
- Consider options and need for further intervention based on data.
- Upon the decision to move to Tier IV, an RtI report should be written by someone trained to write the report and interpret data (i.e. school psychologist and others trained). The report should include data and graphs from Tiers I, II, and III.
Tier III Problem-Solving Parent Invitation

Student: | Grade: | Date: |
---|---|---|
Teacher: | School: | |
Parents: | Tier III Case Manager: | |

Dear Parents:

The Tier III Problem-Solving Team is planning a conference to share with you our efforts to date, and to gain your input and support for your child's success here at school. Since you know your child best, your insights and participation are very important. We would like to review the accommodations and interventions used so far to determine if any additional assistance is needed to increase your child's performance.

Date: |
---|
Time: |
Location: |
Address: |
Phone: |
Contact: |

Our school uses the Problem-Solving Model, a series of assessments and interventions, to help determine the true nature of your child's difficulty, and to develop an effective plan that will help increase his/her level of performance here at school. Our Problem-Solving Team meets on a regular basis to offer assistance to students, teachers, and parents regarding student success here in school. The following team members are planning to attend your conference:

| Name | Position | Name | Position |
---|---|---|---|

We encourage you to invite someone else who is important in your child's life, and wants to see his/her success here at school. If you have any questions or need to reschedule, please don't hesitate to contact me. We look forward to working with you.

Sincerely,

Tier III Problem-Solving Team Consultant

Revised 5/08
Student Name: ___________________________ Date __________________
Area(s) Targeted for Instruction/Intervention: __________________________________________
Problem Identification/Definition: (What is the specific problem?) __________________________

<table>
<thead>
<tr>
<th>Domain</th>
<th>Problem Analysis (Why is the Problem Occurring?)</th>
<th>Assessment Plan for Target Area(s) (Consider RIOT)</th>
<th>Person Responsible for Assessment Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Curriculum</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Instruction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Learner</td>
<td></td>
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</tr>
</tbody>
</table>

Date & Time for Review Meeting: ________________________________________________
Revised 5/08
Baseline Data and Validation of area(s) targeted for instruction (Student performance in targeted area before intervention):

<table>
<thead>
<tr>
<th>What is the expected level of student performance? (B)</th>
<th>Short Term Goals (Realistic/Ambitious Growth Rates)</th>
<th>Long-Term Goals (Benchmarks from State, District, School or Research Norms)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
<tr>
<td>What is the student's current level of performance (baseline)? (A)</td>
<td></td>
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<tr>
<td>=</td>
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<tr>
<td>What is the difference between A and B? (C)</td>
<td></td>
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<tr>
<td>=</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What goal setting method was used to determine short term and long term goals?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Hypothesis (Why is the problem occurring?):

The difference between current performance and expected performance will be reduced if:

Performance Goal (from C above):
NC Department of Public Instruction  
Tier III Problem-Solving

Student Name: __________________________ Date: __________________________
Target Area(s) for Instruction/Intervention: __________________________
Goal/Prediction/Explanation: (expected growth, timeframe, behavior, criterion) __________________________

<table>
<thead>
<tr>
<th>Procedures (Instructional Strategies):</th>
<th>Arrangements (Where/Frequency/Length of Time/Materials):</th>
<th>Person(s) Responsible:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Measurement Strategy  
(Method of data collection, measurement conditions, monitoring schedule): __________________________

| Evaluation Plan  
(Frequency of data collection, strategies to be used to summarize data for evaluation, number of data points or length of time before data analysis/decision rule): |
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

* Attach graph or other visual representation

Revised 5/08
<table>
<thead>
<tr>
<th>Baseline Data (from Tier III page 2)</th>
<th>Current level of Performance (after intervention)</th>
<th>Did the student meet the performance goal (bottom of page 2) that was set?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current level of Performance (after intervention)</td>
<td>Benchmark (long-term goal)</td>
<td>Difference between current level of performance (after intervention) and benchmark (long-term goal)</td>
</tr>
</tbody>
</table>

Check as appropriate:
- Area targeted for instruction/intervention is no longer an area of concern
- Continue instructional/intervention plan
- Redesign or modify instructional/intervention plan
- Move to Tier IV

The following have been conducted. Results were considered and documentation is included for Tier III Problem-Solving:
- Speech Language Screening
- Social Developmental History
- Observation by an independent observer

Signature

Position

Date
**NC Department of Public Instruction**
**Problem-Solving Model Classroom Observation**

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Grade:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher:</td>
<td>School:</td>
<td></td>
</tr>
<tr>
<td>Observer:</td>
<td>Observer’s Title:</td>
<td></td>
</tr>
<tr>
<td>Number of Teachers Present:</td>
<td>Number of Students:</td>
<td>Time of Day:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Subject Observed (please check one subject)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Art</td>
</tr>
<tr>
<td>☐ Language</td>
</tr>
<tr>
<td>☐ Music</td>
</tr>
<tr>
<td>☐ Reading</td>
</tr>
<tr>
<td>☐ Computers</td>
</tr>
<tr>
<td>☐ Library</td>
</tr>
<tr>
<td>☐ Physical Education</td>
</tr>
<tr>
<td>☐ Science</td>
</tr>
<tr>
<td>☐ Free Time</td>
</tr>
<tr>
<td>☐ Mathematics</td>
</tr>
<tr>
<td>☐ Recess</td>
</tr>
<tr>
<td>☐ Social Studies</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Learning Situation (please check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Regular Classroom</td>
</tr>
<tr>
<td>☐ Single teacher</td>
</tr>
<tr>
<td>☐ Self-contained classroom</td>
</tr>
<tr>
<td>☐ Multiple teachers in room</td>
</tr>
<tr>
<td>☐ Homeroom grouping</td>
</tr>
<tr>
<td>☐ Direct instruction (lecture)</td>
</tr>
<tr>
<td>☐ Ability grouping</td>
</tr>
<tr>
<td>☐ Cooperative learning (group)</td>
</tr>
<tr>
<td>☐ Whole class</td>
</tr>
<tr>
<td>☐ Independent work</td>
</tr>
<tr>
<td>☐ Small group</td>
</tr>
<tr>
<td>☐ One-on-one tutor/assistance</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student Behaviors Observed (please check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Aggressive toward children</td>
</tr>
<tr>
<td>☐ Controls discussions</td>
</tr>
<tr>
<td>☐ Easily distracted</td>
</tr>
<tr>
<td>☐ Sit quietly</td>
</tr>
<tr>
<td>☐ Asks for help</td>
</tr>
<tr>
<td>☐ Daydreams</td>
</tr>
<tr>
<td>☐ Easily frustrated</td>
</tr>
<tr>
<td>☐ Speech problems</td>
</tr>
<tr>
<td>☐ Attentive</td>
</tr>
<tr>
<td>☐ Demands excessive attention</td>
</tr>
<tr>
<td>☐ Friendly</td>
</tr>
<tr>
<td>☐ Talks excessively</td>
</tr>
<tr>
<td>☐ Avoids eye contact</td>
</tr>
<tr>
<td>☐ Difficulty copying from board</td>
</tr>
<tr>
<td>☐ Immature behavior</td>
</tr>
<tr>
<td>☐ Talks out of turn</td>
</tr>
<tr>
<td>☐ Avoids groups</td>
</tr>
<tr>
<td>☐ Disorganized work habits</td>
</tr>
<tr>
<td>☐ Neat appearance</td>
</tr>
<tr>
<td>☐ Trouble finding place</td>
</tr>
<tr>
<td>☐ Careless mistakes</td>
</tr>
<tr>
<td>☐ Displays leadership ability</td>
</tr>
<tr>
<td>☐ Obscene/inappropriate speck</td>
</tr>
<tr>
<td>☐ Unusual language</td>
</tr>
<tr>
<td>☐ Completes work on time</td>
</tr>
<tr>
<td>☐ Disruptive</td>
</tr>
<tr>
<td>☐ Overactive, restless</td>
</tr>
<tr>
<td>☐ Withdrawn</td>
</tr>
<tr>
<td>☐ Constantly out of seat</td>
</tr>
<tr>
<td>☐ Does not complete tasks</td>
</tr>
<tr>
<td>☐ Perseverates/repeats behavior</td>
</tr>
<tr>
<td>☐ Works well by self</td>
</tr>
<tr>
<td>☐ Contributes to class discussion</td>
</tr>
<tr>
<td>☐ Does not follow directions</td>
</tr>
<tr>
<td>☐ Short attention span</td>
</tr>
<tr>
<td>☐ Works well with others</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Learning Environment (please check only one description for each environmental factor)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Classroom Design:</td>
</tr>
<tr>
<td>☐ Traditional four-wall &amp; door</td>
</tr>
<tr>
<td>☐ Open/pod design</td>
</tr>
<tr>
<td>☐ Other</td>
</tr>
<tr>
<td>☐ Classroom lighting:</td>
</tr>
<tr>
<td>☐ Bright</td>
</tr>
<tr>
<td>☐ Moderate</td>
</tr>
<tr>
<td>☐ Inadequate</td>
</tr>
<tr>
<td>☐ Seating arrangement:</td>
</tr>
<tr>
<td>☐ Rows facing front</td>
</tr>
<tr>
<td>☐ Desk groupings</td>
</tr>
<tr>
<td>☐ U-shaped facing front</td>
</tr>
<tr>
<td>☐ Student placement:</td>
</tr>
<tr>
<td>☐ Back/middle of room</td>
</tr>
<tr>
<td>☐ Front of room</td>
</tr>
<tr>
<td>☐ Near teacher’s desk</td>
</tr>
<tr>
<td>☐ Temperature:</td>
</tr>
<tr>
<td>☐ Hot/stuffy</td>
</tr>
<tr>
<td>☐ Comfortable</td>
</tr>
<tr>
<td>☐ Chilly</td>
</tr>
<tr>
<td>☐ Noise levels:</td>
</tr>
<tr>
<td>☐ Quiet</td>
</tr>
<tr>
<td>☐ Moderate</td>
</tr>
<tr>
<td>☐ Noisy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Were there hallway noises or other distractions? ☐ yes ☐ no</th>
<th>Did visitors interrupt the lesson? ☐ yes ☐ no</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Responses to Teacher and Peers (all that apply)</td>
<td>Student Communication with Teacher (all that apply)</td>
</tr>
<tr>
<td>☐ Fast</td>
<td>☐ Frequently</td>
</tr>
<tr>
<td>☐ Well organized</td>
<td>☐ Infrequently</td>
</tr>
<tr>
<td>☐ Moderate</td>
<td>☐ Voluntary</td>
</tr>
<tr>
<td>☐ Clear and understandable</td>
<td>☐ Teacher-initiated</td>
</tr>
<tr>
<td>☐ Slow</td>
<td>☐ Interrupts teacher</td>
</tr>
<tr>
<td>☐ Difficulty expressing self</td>
<td>☐ Interrupts peers</td>
</tr>
<tr>
<td>☐ With prompting</td>
<td>☐ Ignores teacher</td>
</tr>
<tr>
<td>☐ Spoke softly</td>
<td>☐ Ignores peers</td>
</tr>
<tr>
<td>☐ Blurted out-of-turn</td>
<td>☐ Off the subject of discussion</td>
</tr>
<tr>
<td>☐ Attention seeking</td>
<td>☐ Enjoying argument/goading</td>
</tr>
</tbody>
</table>

Other Significant Student Behaviors or Student/Teacher Interactions (use back of this form if necessary)
Teacher's clinical observations regarding the student's current academic, social, and behavioral performance provide crucial information regarding the student's strengths and weaknesses. To better assess the student's needs, please write in narrative form a summary of the student's overall performance in your classroom. Be sure to include any and all interventions you have used with the students in relation to the area(s) targeted for instruction/intervention.

**Academic, Behavioral, Social, and Emotional Observations**

Please describe your observation in narrative or bullet format

---

**Teacher's Signature:**

---
Statement of Integrity
Level III

The problem-solving model, strategies, and interventions (SSMT process) have been implemented, sustained, analyzed, and documented with integrity for the student's academic and developmental well-being.

Multidisciplinary Team (SSMT) and Position

____________________________________ (SSMT Chair)

____________________________________

____________________________________

____________________________________

____________________________________

____________________________________
Level 4 – Referral Information for EC Evaluation
NC Department of Public Instruction
Problem-Solving Model Tier IV

LEA: ___________________________ School: ___________________________

Student’s Name: ___________________________

Case Manager: ___________________________

Recommendation:

☐ Re-initiate the problem-solving process.

☐ Add to or modify the intervention in the following way: (Review date: ___________________________)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

☐ Initiate a referral to the IEP Team for consideration of Special Education eligibility.

Committee Members:

<table>
<thead>
<tr>
<th>Member</th>
<th>Position</th>
<th>Date</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Adapted with permission from Horry County Schools, South Carolina

Revised 5/08
FOCUS OF CONCERN/SCREENING

Student: ____________________________ School: ____________________________
Sex: _____ Race: _____ Grade: ________ Parent/Guardian: ____________________________
Date of Birth: _____/_____/____ Age: _____
I.D. Number: ________________________ Telephone: ____________________________

I. Parent Conference/Contact Record
   A. First Contact/Attempt
      Date: _____/_____/____
      School Person Making Contact: ____________________________ Position: __________
      Type of Contact: _____ School Conference _____ Letter/Note _____ Home Visit _____ Phone Call
                     _____ Other: ____________________________
      Purpose: ____________________________
      Comments on Conference: ______________________________________________________
   
   B. Second Contact/Attempt
      Date: _____/_____/____
      School Person Making Contact: ____________________________ Position: __________
      Type of Contact: _____ School Conference _____ Letter/Note _____ Home Visit _____ Phone Call
                     _____ Other: ____________________________
      Purpose: ____________________________
      Comments on Conference: ______________________________________________________

II. Parental Notification of Screening Procedures Form (RE2) Sent
    Notice Sent by: ____________________________ Date: _____/_____/____

III. Classroom Observation
    Observer: ____________________________ Position: ____________________________ Date: _____/_____/____

   A. Subject Observed
      Language Arts _______ Social Studies _______ One-to-One _______ Small Group
      Music _______ Science _______ Class _______ Independent
      Free Time _______ Physical Educ. _______ Math _______
      Other: ____________________________

   B. Learning Situation
      Difficulty copying _______ Careless, doesn't complete tasks _______ Neat appearance
      from board _______ Constantly out of seat _______ Demands excessive attention
      Discusses _______ Contributes to class discussion _______ Perseverates (repeats behavior)
      Sits quietly _______ Friends _______ Daydreams _______ Tries to control others
      Talks out of turn _______ Short attention span _______ Avoids groups _______ Cooperative
      Easily distracted _______ Disruptive _______ Doesn't follow directions _______ Unusual language
      Overactive, restless _______ Display leadership ability _______ Unusual language _______ Speech problem
      Talks excessively _______ Mature behavior _______ Other: ____________________________
      Immature behavior _______ Withdrawn _______
      Works well independently _______ Friendly _______
      Disruptive _______ Troublesome _______
      Trouble finding place _______ Disorganized work habits _______
      Easily frustrated _______ Aggressive toward children _______
      Avoids eye contact _______ Obscene language _______
      Additional Comments (if any): ______________________________________________________
IV. Screening Committee Data Collection

A. Records Review – School History

1. Attendance Pattern (indicate where problems occurred):

<table>
<thead>
<tr>
<th>Grade</th>
<th>Days Enrolled</th>
<th>Absences</th>
<th>Tardies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

2. Past and Current Subject Marks (three most recent, if appropriate):

<table>
<thead>
<tr>
<th>School Year</th>
<th>Grade</th>
<th>Subject/Mark</th>
<th>Subject/Mark</th>
<th>Subject/Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

3. Review of Previous Testing:
   a. Instrument Used: ____________________________
      Date: ____________________________
      Results: ____________________________
   b. Instrument Used: ____________________________
      Date: ____________________________
      Results: ____________________________
   c. Group Standardized Test Scores (record percentile scores)
      Name of Test: ____________________________

<table>
<thead>
<tr>
<th>Subtest</th>
<th>Year / ______</th>
<th>Year / ______</th>
<th>Year / ______</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reading</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Language</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Math</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Battery</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B. General Medical – Health Screening

1. Describe any serious illness or accident since birth:
   Date: ______/_____/______ Hospitalized ( ) Yes ( ) No
   Date: ______/_____/______ Hospitalized ( ) Yes ( ) No

2. Other Relevant Health Information:


3. Visual Acuity
   Far Pass/Fail (Circle one) Date: ______/_____/______
   Near Pass/Fail (Circle one) Date: ______/_____/______

4. Hearing Pass/Fail (Circle one) Date: ______/_____/______

C. Social Functioning, Environmental and Cultural Status

Information concerning the social, environmental and cultural status of this student has been reviewed.
( ) Yes ( ) No
Comments: ____________________________


### V. Intervention Strategies

**Area of Concern:**

<table>
<thead>
<tr>
<th>Interventions Utilized</th>
<th>Dates (Month/Day/Year)</th>
<th>Results (Check)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Beginning Date</td>
<td>Review Date</td>
</tr>
<tr>
<td>1. Modified Instruction</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Modified Environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Counseling, Support Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Behavioral Contract, Point System, Charting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Parent Follow-Up</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Time-Out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Detention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Specialized Instructional Equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Peer Tutor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Title 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Other Supports (Volunteer)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Public/Private Agency</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Community Resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Change in Schedule</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Change in Teacher(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Tutoring</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Other (Specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Other (Specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Other (Specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Other (Specify)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Signature of Person(s) Using Strategies:**

[Signature]

Date: __/__/__

[Signature]

Date: __/__/__

[Signature]

Date: __/__/__
VI. Based on information gathered during the screening process, it is the decision of this committee to:

A. First Meeting
   (Check One)
   1. _____ Refer for evaluation.
   2. _____ Continue regular education program with new strategies for ____ weeks.
   3. _____ Continue regular education program with strategies proved effective during screening process.

Explanation of the above checked action:


Committee Members' Signatures      Position      Date


B. Second Meeting (Only needed if A(2) is checked above)
   (Check One)
   1. _____ Refer for evaluation.
   2. _____ Continue regular education program with strategies proved effective during screening.

Explanation of the above checked action:


Committee Members' Signatures      Position      Date


Revised 7/04
<table>
<thead>
<tr>
<th>SSMT Process</th>
<th>Re-evaluation for comprehensive and students going from DD to school aged category</th>
<th>Re-evaluation-for no additional testing and Review of existing data</th>
<th>Initial referral</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Screening (health, vision, Hearing)</td>
<td>☐ Screening (health, vision, Hearing)</td>
<td>☐ Dec 7</td>
<td>☐ Need Packet from SSMT Process</td>
</tr>
<tr>
<td>☐ Summary of Conference(s)</td>
<td>☐ Summary of Conference(s)/New Form</td>
<td>☐ Dec 3</td>
<td>☐ Dec 1</td>
</tr>
<tr>
<td>☐ Research Based Interventions (two with data and outcomes)</td>
<td>☐ Dec 2</td>
<td>☐ Dec 5</td>
<td>☐ Dec 2</td>
</tr>
<tr>
<td>☐ Social History</td>
<td>☐ Updated Social History</td>
<td>☐ Minutes</td>
<td>☐ Dec 5</td>
</tr>
<tr>
<td>☐ Observation across settings</td>
<td>☐ Observations across settings</td>
<td></td>
<td>☐ Minutes</td>
</tr>
<tr>
<td>☐ Speech Screening for Students referred for speech</td>
<td>☐ Dec 3 attach copy of current form</td>
<td>☐ Dec 5</td>
<td></td>
</tr>
<tr>
<td>☐ All Information Must be Current (within one year)</td>
<td>☐ DEC 7</td>
<td>☐ Minutes</td>
<td></td>
</tr>
</tbody>
</table>

**Student Name:** ________________________________

**School:** ________________________________

**Action taken:** ________________________________

**Compliance Specialist:** ________________________________
Addendum
NC Department of Public Instruction
Website Information

http://www.ncpublicschools.org/ec/development/learning/responsiveness/rtimaterials
NC Department of Public Instruction  
Problem-Solving Model Tier I  

Student Name: Johnny Doe  
NCWISE#: 123456  
Date: 1/8/07  
Teacher: Mrs. Flora  
DOB: 3/31/2000  
Grade: 1  
Retention(s) - Specify Grade Level(s): N/A  

<table>
<thead>
<tr>
<th>Attendance</th>
<th>Grade K</th>
<th>Grade 1</th>
<th>Grade 2</th>
<th>Grade 3</th>
<th>Grade 4</th>
<th>Grade 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrolled/Present</td>
<td>173/180</td>
<td>169/180</td>
<td></td>
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Area(s) of Concern (attach PEP if available)  

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<th>Behavior</th>
<th>Other</th>
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<tbody>
<tr>
<td>X Phonemic Awareness</td>
<td>Basic Math Facts</td>
<td>Noncompliance</td>
<td>Medical (area:</td>
</tr>
<tr>
<td>X Word Identification</td>
<td>Computation</td>
<td>Motivation</td>
<td>Motor Skills</td>
</tr>
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<td>Problem-Solving</td>
<td>Attention span</td>
<td>Speech/Language</td>
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<td>Measurement</td>
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<td>Hearing</td>
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<td>_Other</td>
<td>Other</td>
<td>Other</td>
<td>Other</td>
</tr>
</tbody>
</table>

Current Levels  
Reading (1/4/07): PSF=12 ORF=3  
Math (1/4/07): Addition=12 Subtraction=8  
Writing:  
Date of Vision Screening: 1/4/07  
Results: Pass  
Far: 20/20  
Near: 20/20  

EOG Scores  
3rd  
4th  
5th  

Date of Hearing Screening: 10/12/06  
Results: Pass  

Name and Address of Parent/Guardian  
Fawn & Buck Doe  
123 Main St.  
Any Town, NC 98765  

Services Received:  
X Small Group Instruction  
504 Accommodations  
Community Services  
ESL/LEP/ELL  
OCCupational Therapy  
Speech/Language Therapy  
Physical Therapy  
Reading Lab  
Math Lab  
Tutoring  
X Other (please specify: Small Group Literacy Rotation)  

Additional Comments/Information/Teacher Observations:  
Johnny has slow retrieval of letter sounds and struggles with blending. Johnny often fails to recognize common syllable patterns even immediately after they are reinforced in Letterland lessons (e.g. vowel teams and silent-e). Johnny is a motivated worker.
Student Name: Johnny Doe  
DOB: 3/31/00  
Date: 1/10/07  
NCWISE# 123456

Describe Parental Concerns/Involvement in Plan Development: Johnny’s mother and grandmother attended the meeting. His grandmother stated that she would be willing to work with any activities sent home to Johnny on a nightly basis. His mother and grandmother expressed concerns over Johnny frequently not obtaining AR goals and the frustration that is associated with this.

Define the problem (What’s the problem?)
Johnny is experiencing reading difficulty due to slow retrieval of sounds, difficulty blending sounds, and lack of recognition of basic syllable patterns.

Problem Analysis (Why is the problem occurring?) Hypothesis
Phonics instruction provided to Johnny is not meeting his instructional needs. He will require more intense phonics instruction as defined by more time and in a smaller group.

Develop a plan (What are we going to do about it? Describe the plan including a measurable goal statement)
Johnny will work on FCRR blending activities at home and receive a small group 90-minute literacy rotation (phonemic awareness/phonics, fluency, vocabulary/comprehension, and writing). Intervention success will be determined by progress greater than average weekly gains at Lovely Forest Elementary for DIBELS Nonsense Word Fluency (1 sound per week).

Implement the plan (Who, What, When, & Where)
Johnny will receive small group literacy rotation with the literacy specialist, Mrs. Flora, and teacher assistants.

Evaluation (Did it work?)
Johnny did not meet his goal of 1 sound per week gain. Johnny went four consecutive weeks below his Aim Line.

How is the student performing to his/her peers?
Johnny is significantly below DIBELS benchmarks.

Baseline (current level of performance):  7 (median of last 3 NWF probes)
Benchmark (desired level of performance): >=50 (DIBELS “Low risk” Benchmark)
Instructional Plan Results: (Did it work) Attach Progressing Monitoring Data
See attached graph titled “PSM Tier I Progress Monitoring”.

Beginning Implementation Date: 1/15/07

Decision:  
- [ ] Continue Instructional Plan
- [ ] Modify Plan
- [ ] Discontinue Plan
- [X] Move to PSM Tier II

Date of Decision: 2/21/07

Rational for Decision:
Johnny’s performance was consistently below his Aim Line and significantly below DIBELS benchmarks.

Meeting Notes: The decision was made to move to PSM Tier II. The Tier II consultant for first grade will be contacted to begin Tier II Problem Solving.

Attendees: Mrs. Flora and Johnny’s grandmother.

Decision:  
- [ ] Continue Instructional Plan
- [ ] Modify Plan
- [ ] Discontinue Plan

Date of Decision:

Rational for Decision:

Meeting Notes:

Attendees:
**Student Name:** Johnny Doe  
**Grade:** 1  
**DOB:** 3/31/2000  
**NCWISE#:** 123456  
**Teacher:** Mrs. Flora  
**Meeting Date:** 2/28/07

**Problem Identification/Definition (What is the problem?)**  
Johnny is experiencing reading difficulty due to slow retrieval of sounds, difficulty blending sounds, lack of recognition of basic syllable patterns, and lack of sight word recognition.

**Problem Analysis/Hypothesis (Why is the problem occurring?)**  
Despite a small group literacy rotation, Johnny failed to make adequate progress on probes of Nonsense Word Fluency. Johnny likely needs additional phonics instruction to supplement the 90-minute rotation.

**Baseline/Benchmark Data: (Student’s current performance/Expected Performance)**  
- Nonsense Word Fluency: 7  
- Sight Word Identification: 9

**Plan Development and Implementation (What are we going to do about it?)**  
Johnny will receive a 90-minute small group rotation, 30-minute small group pull-out with the literacy specialist, and FCRR blending activities at home.

**Measurable Goal Statement:**  
Johnny will make progress of 1 sound per week on DIBELS NWF probes and 1.25 sounds per week on Sight Word Identification probes.

**Meeting Notes:**  
The literacy specialist noted difficulties with sight word recognition and suggested that intervention and assessment should take this into account.

**Review Date:** 4/2/07

**Decision date:** 4/1/07
NC Department of Public Instruction  
Tier II Problem-Solving

| Name: Johnny Doe | DOB: 3/31/2000 | NCWISE/SIMS# 123456 |

**Results of Plan Implementation (attach Progress Monitoring data):**

See attached graph titled, “PSM Tier II Progress Monitoring”

**Plan Evaluation (Did it work?)**  
While Johnny made progress, his performance was slightly below the Aim Line. Modifications to the current intervention plan were determined to be most appropriate at this time.

<table>
<thead>
<tr>
<th>Decision</th>
<th>Date of Next Meeting (or N/A): 5/1/07</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Continue Intervention</td>
<td>☑ Modify Intervention*</td>
</tr>
</tbody>
</table>

*Specify Modification to Instructional/Intervention Plan:* Mrs. Flora and grandmother will work with sight word rings. The literacy specialist will focus on short vowel sounds.

**Meeting Notes:** Johnny will also be able to earn AR incentives based upon his progress on NWF and Sight Word Identification probes.

**Meeting Attendees:** Ms. Flora and Literacy Specialist

<table>
<thead>
<tr>
<th>Decision</th>
<th>Date of Next Meeting (or N/A): 9/17/07 (next school yr.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Continue Intervention</td>
<td>☐ Modify Intervention*</td>
</tr>
</tbody>
</table>

*Specify Modification to Instructional/Intervention Plan:*

**Meeting Notes:** Despite modified intervention efforts, Johnny’s performance continued to remain below Aim Line for NWF and Sight Word Identification probes. See attached graph “PMS Tier II Modification Progress monitoring-DIBELS NWF and Sight word Identification.

**Meeting Attendees:** Ms. Flora and Literacy Specialist
NC Department of Public Instruction  
Problem-Solving Model Tier III

Student Name: Johnny Doe  
Date: 9/14/07

Area(s) Targeted for Instruction/Intervention: Decoding and fluency

Problem Identification/Definition: (What is the specific problem?) Johnny is experiencing reading difficulty due to slow retrieval of sounds, difficulty blending sounds, lack of recognition of basic syllable patterns, and lack of sight word recognition.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Problem Analysis (Why is the Problem Occurring?)</th>
<th>Assessment Plan for Target Area(s) (Consider RIOT)</th>
<th>Person Responsible for Assessment Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental</td>
<td></td>
<td>Review universal screening results, report cards, attendance</td>
<td>School Psychologist</td>
</tr>
<tr>
<td>Curriculum</td>
<td>Johnny’s reading level is generally below that of the second grade Scott Foresman Reading Street curriculum.</td>
<td></td>
<td>School Psychologist</td>
</tr>
<tr>
<td>Instruction</td>
<td>Johnny requires more instructional time focused upon explicit phonics instruction.</td>
<td>Observe in the classroom</td>
<td>School Psychologist</td>
</tr>
<tr>
<td>Learner</td>
<td>Johnny has slow retrieval of letter-sounds and sight words, as well as difficulty blending sounds. Johnny requires a small group setting that allows frequent redirection.</td>
<td>Phoneme ID, Blend ID, Sight Word ID, and Word ID (passage) probes</td>
<td>School Psychologist</td>
</tr>
</tbody>
</table>

Date & Time for Review Meeting: 11/8/07

Revised Sept 2007
Student Name: Johnny Doe
Date: 9/14/07
Target Area(s) for Instruction: Decoding (Blend ID)

Baseline Data and Validation of area(s) targeted for instruction (Student performance in targeted area before intervention):

What is the expected level of student performance? (B) 10

What is the student’s current level of performance (baseline)? (A) 3

What is the difference between A and B? (C) 7

What goal setting method was used to determine short term and long term goals?

Short Term Goals (Realistic/Ambitious Growth Rates)

Long-Term Goals (Benchmarks from State, District, School or Research Norms)

Woods County average weekly gains

District Norms (Winter)

Hypothesis (Why is the problem occurring?):
At the current time, Johnny’s instructional level is below that of the second grade curriculum in reading. Small group intense intervention focused on foundational skills is necessary to reduce the gap between expected and actual performance.

The difference between current performance and expected performance will be reduced if: Johnny receives intense and explicit instruction in phonics, decoding, sight word identification, and fluency.

Performance Goal (from C above): 1 word per week gain / 10 total words at next review

Revised Sept 2007
NC Department of Public Instruction
Problem-Solving Model Tier III

Student Name: __Johnny Doe__  Date: __9/14/07__

Target Area(s) for Instruction/Intervention: __Decoding and Fluency__  Date/Time for Review Mtg: __11/8/07__

Goal/Prediction/Explanation: (expected growth, timeframe, behavior, and criterion) Johnny is expected to make growth of 1 word per week on a measure of blend identification (nonsense words).

<table>
<thead>
<tr>
<th>Procedures (Instructional Strategies):</th>
<th>Arrangements (Where/Frequency/Length of Time/Materials):</th>
<th>Person(s) Responsible:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language curriculum</td>
<td>90 minutes / Daily</td>
<td>EC Teachers</td>
</tr>
<tr>
<td>Letterland Interventions</td>
<td>25 minutes / Daily</td>
<td>Literacy Specialist</td>
</tr>
<tr>
<td>Florida Center for Reading Research (FCRR) activities focused on blending, syllable patterns, and sight word recognition</td>
<td>Nightly</td>
<td>Parents and Grandparents</td>
</tr>
<tr>
<td>Progress monitoring</td>
<td>2 times per week</td>
<td>School Psychologist</td>
</tr>
</tbody>
</table>

*Measurement Strategy*
(Method of data collection, measurement conditions, monitoring schedule):
The following probes will be administered: Phoneme ID, Blend ID, Sight Word ID, Word ID (Passages). The probes will be administered on Tuesday and Thursday mornings.

*Evaluation Plan*
(Frequency of data collection, strategies to be used to summarize data for evaluation, number of data points or length of time before data analysis/decision rule):
Decision rule for change in intervention / movement to Tier IV is 4 consecutive points below the Aim Line. Progress will be examined at next SST meeting on 11/8/07.

* Attach graph or other visual representation

Revised Sept 2007
NC Department of Public Instruction
Problem-Solving Model Tier III
Student Name: _____ Johnny Doe _____ Date: ____11/8/07_____
Area(s) targeted for Instruction/Intervention: _____ Decoding and Fluency ______

<table>
<thead>
<tr>
<th>3</th>
<th>5</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Baseline Data (from Tier III page 2)</td>
<td>Current level of Performance (after intervention)</td>
<td>Did the student meet the performance goal (bottom of page 2) that was set?</td>
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</table>

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<thead>
<tr>
<th>5</th>
<th>36</th>
<th>31</th>
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</thead>
<tbody>
<tr>
<td>Current level of Performance (after intervention)</td>
<td>Benchmark (long-term goal)</td>
<td>Difference between current level of performance (after intervention) and benchmark (long-term goal)</td>
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</tbody>
</table>

*See attached graphs for Phoneme ID, Blend ID, Sight Word ID, and Oral Reading Fluency

Check: _____ Area targeted for instruction/intervention is no longer an area of concern
Appropriate: _____ Continue instructional/intervention plan
_____ Redesign or modify instructional/intervention plan
X Move to Tier IV

Signature ___________________________ Position ___________________________ Date ___________________________

Signature ___________________________ Position ___________________________ Date ___________________________

Signature ___________________________ Position ___________________________ Date ___________________________

Revised Sept 2007
NC Department of Public Instruction
Tier IV Problem-Solving

LEA: Woods County
School: Lovely Forest Elementary

Student’s Name: Johnny Doe

Case Manager: Bobby Hunter, School Psychologist

RECOMMENDATION:

_____ Re-initiate the problem-solving process.

_____ Add to or modify the intervention in the following way: (Review date: ________)

_____ X Initiate a referral to the IEP Team for consideration of Special Education eligibility based on the following:

While Johnny has shown some progress and growth with the documented interventions, he continues to remain well below the expected growth rate and performance. Strategies needed to make continued growth and progress require intensive implementation with high frequency and close monitoring.

Committee Members:

<table>
<thead>
<tr>
<th>Member</th>
<th>Position</th>
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NC Department of Public Instruction  
Problem-Solving Model Tier I

Student Name: Natasha Joy  
DOB: 05/20/98  
NCWISE#: 987654  
Date: 09/17/07  
Teacher: Ms. Carr  
Retention(s) - Specify Grade Level(s): N/A

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Area(s) of Concern (attach PEP if available):

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Current Levels  
Reading: STAR Level: 3.1  
Math:  
Writing:  
Date of Vision Screening: 09/10/07  
Results: Passed  
Far: 20/20  
Near: 20/20

EOG Scores  
3rd  
Reading: Level II  
Math: Level III  
4th  
Reading: Level II  
Math: Level III  
5th  

Date of Hearing Screening:  
Results:  

Name and Address of Parent/Guardian  
Mrs. Joy  
222 Joy Street  
Hometown, NC

Services Received:  
_____ Small Group Instruction  
_____ Individual Instruction  
_____ Counseling  
_____ Title I  
_____ 504 Accommodations  
_____ Community Services  
_____ ESL/LEP/ELL  
_____ Occupational Therapy  
_____ Speech/Language Therapy  
_____ Physical Therapy  
_____ Reading Lab  
_____ Math Lab  
_____ X Tutoring  
_____ X Other (please specify: Summer School )

Additional Comments/Information/Teacher Observations:  
Natasha changed schools two times last school year. Natasha's math skills are stronger than her reading skills. She is attending after school tutoring two times a week. She is a hard worker with a great attitude. Natasha passed third grade, using Safe Harbor for EOG. Some progress and continued effort justified her passing fourth grade, despite making Level II on EOG. She has preferential seating and "check-ins" with her teacher during instruction.
**Student Name:** Natasha Joy  
**DOB:** 05/20/98  
**Date:** 09/17/07  
**NCWISE# 987654**

**Describe Parental Concerns/Involvement in Plan Development:**
Mrs. Joy explained that she has concerns about Natasha possibly having "ADD". She says that she is willing to do whatever will help Natasha at school. Mrs. Joy agrees to review flash cards 5 days a week of the sight words that the teacher is working on in small group. She will also spend 20 minutes a night with Natasha to help her read AR books and then ask her comprehension questions until she reaches 100% accuracy on the specific book.

**Define the problem (What's the problem?)**
Natasha has difficulty with recognizing sight words, vocabulary words and gaining meaning (comprehension) of what she reads.

**Problem Analysis (Why is the problem occurring?) Hypothesis**
The problem is occurring because of Natasha's poor reading fluency skills. She struggles to identify sight words, and loses the intent of the reading passage.

**Develop a plan (What are we going to do about it? Describe the plan including a measurable goal statement)**
Natasha will work in a group of 5 students with the teacher to drill basic sight word identification 2 times a week. Natasha will be able to identify 30 grade level vocabulary words after 4 weeks of drill and practice with the teacher, and practice from her mother at home.

**Implement the plan (Who, What, When, & Where):**
Teacher will practice 2 times a week, with Natasha in a small group;  
Mother will review sight words each night and read with her for 20 min. each night, reviewing comprehension questions.

**Evaluation (Did it work?)**
After 4 weeks of intervention, Natasha is able to identify 18 of the 30 sight words that have been presented.

**How is the student performing to his/her peers?**
Peers are identifying 100 sight words that have been presented/reviewed.

**Baseline (current level of performance):**
STAR level 3.1; 20 of the 5th grade level sight words.

**Benchmark (desired level of performance):**
Read 30 of the 30 words presented.
Instructional Plan Results: (Did it work) Attach Progressing Monitoring Data

Beginning Implementation Date: 9/17/07

Decision: Continue Instructional Plan   Modify Plan   Discontinue Plan   Move to PSM Tier II

Date of Decision: 10/15/07

Rationale for Decision:
Despite receiving extra help from mom at home with flash cards and AR Books as well as receiving extra small group instruction in the class from her teacher 2X/week, Natasha made minimal progress compared to other students in the small group.

Meeting Notes: Mother feels a move to more frequency of intervention is needed.

Attendees: Ms. Carr; Mother

Decision: Continue Instructional Plan   Modify Plan   Discontinue Plan   Move to PSM Tier II

Date of Decision:

Rationale for Decision:

Meeting Notes:

Attendees:
NC Department of Public Instruction
Tier II Problem-Solving

<table>
<thead>
<tr>
<th>Student Name: Natasha Joy</th>
<th>Grade: 5</th>
<th>DOB: 05/20/98</th>
<th>NCWISE/SIMS#: 7777777</th>
<th>Meeting Date: 10/15/07</th>
</tr>
</thead>
</table>

**Teacher:** Ms. Carr

**Problem Identification/Definition (What is the problem?)**
Natasha struggles with basic sight word recognition. She also struggles with comprehension of written material due to her poor fluency when reading a passage, story or book.

**Problem Analysis/Hypothesis (Why is the problem occurring?)**
Natasha is struggling with reading fluency because of her poor reading fluency, due to her low sight word vocabulary.

Natasha does not comprehend what she reads silently, due to low reading fluency.

**Baseline/Benchmark Data: (Student’s current performance/Expected Performance)**
STAR level: 3.1; 22 / 100 of the 5th grade level words

**Plan Development and Implementation (What are we going to do about it?)**
Natasha will work in a group of 5 students with the teacher to drill basic sight word identification 4 times a week. Mom will also drill the words each night at home, for 20 min. Natasha will be able to identify 35 grade level words after 4 weeks of drill and practice with the teacher and her mom.

**Measurable Goal Statement:**
Natasha will be able to identify 35 of 100 vocabulary words when presented to her.

**Meeting Notes:** Classroom teacher, case colleague and mother attended the meeting. Mom agreed to continue helping at home with reading AR books and using flash cards to help with sight words.

**Review Date:**
11/12/07

**Decision date:**

Revised 10/06
## Tier II Problem-Solving

### NC Department of Public Instruction

<table>
<thead>
<tr>
<th>Name: Natasha Joy</th>
<th>DOB: 05/20/98</th>
<th>NCWISE/SIMS#: 777777</th>
</tr>
</thead>
</table>

### Results of Plan Implementation (attach Progress Monitoring data):

After 4 weeks of intervention Natasha is able to identify 27 vocabulary words that were targeted from the class list for review. Mom reports that Natasha is inconsistent in remembering words from night to night. Teacher has seen some inconsistency as well.

### Plan Evaluation (Did it work?)

Overall results from intervention suggest that Natasha has made progress but is still significantly behind her classmates. Classroom teacher and mother report that Natasha has been very inconsistent with applying skills taught. She is currently failing reading in the classroom. Overall the plan has been unsuccessful. At this time, it seems appropriate to bring Natasha to the Problem Solving Team to further assess her academics.

#### Decision:

- [ ] Continue Intervention
- [ ] Modify Intervention*
- [ ] Discontinue Intervention
- [✓] Move to PSM Tier III

#### Date of Next Meeting (or N/A): 11/19/07

### *Specify Modification to Instructional/Intervention Plan:

### Meeting Notes:

Decision was made to move to Tier III based on Natasha’s lack of adequate progress and current failing grades.

### Meeting Attendees:

Teacher, Mother, Case colleague

### Decision:

- [ ] Continue Intervention
- [ ] Modify Intervention*
- [ ] Discontinue Intervention
- [ ] Move to PSM Tier III

#### Date of Next Meeting (or N/A): ________________

### *Specify Modification to Instructional/Intervention Plan:

### Meeting Notes:

### Meeting Attendees:

Revised 10/06
NC Department of Public Instruction
Tier III Problem-Solving

Student Name: Natasha Joy

Area(s) Targeted for Instruction/Intervention: sight word recognition (vocabulary)

Problem Identification/Definition: Natasha struggles with poor sight word recognition. She also has difficulty with comprehending what she reads due to her low fluency rate.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Problem Analysis (Why is the Problem Occurring?)</th>
<th>Assessment Plan for Target Area(s) (Consider RIOT)</th>
<th>Person Responsible for Assessment Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental</td>
<td>Natasha cannot complete tasks as often as her peers due to distractibility.</td>
<td>ADHD packet</td>
<td>Ms. Carr</td>
</tr>
<tr>
<td>Curriculum</td>
<td>Reading Vocabulary is not adequate to enable Natasha to read fluently and comprehend meaning from passages read independently.</td>
<td>Evaluate grade level assessments; work in Reading Foundations group</td>
<td>Ms. Carr Ms. Joy</td>
</tr>
<tr>
<td>Instruction</td>
<td>Reading occurs in a whole group setting in the classroom of thirty students.</td>
<td>Progress Monitor; collect data from AR tests</td>
<td>Ms. Carr Mr. Brown</td>
</tr>
<tr>
<td>Learner</td>
<td>Natasha cannot self-monitor her behavior or inattention. She has difficulty redirecting herself to task. Her metacognitive skills are lower than other children her age.</td>
<td>Student data sheets</td>
<td>Natasha Ms. Carr</td>
</tr>
</tbody>
</table>

Date & Time for Review Meeting: n/a

Revised Sept 2007
NC Department of Public Instruction  
Tier III Problem-Solving

Student Name: Natasha Joy  
Date: 11/19/07  
Target Area(s) for Instruction: Sight Word Vocabulary

<table>
<thead>
<tr>
<th>Baseline Data and Validation of area(s) targeted for instruction (Student performance in targeted area <strong>before</strong> intervention):</th>
<th>Short Term Goals (Realistic/Ambitious Growth Rates)</th>
<th>Long-Term Goals (Benchmarks from State, District, School or Research Norms)</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the expected level of student performance? (B)</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td>What is the student’s current level of performance (baseline)? (A)</td>
<td>35</td>
<td>-</td>
</tr>
<tr>
<td>=</td>
<td>15</td>
<td>35</td>
</tr>
<tr>
<td>What is the difference between A and B? (C)</td>
<td>LEA growth rates</td>
<td>65</td>
</tr>
<tr>
<td>What goal setting method was used to determine short term and long term goals?</td>
<td>LEA growth rates</td>
<td></td>
</tr>
</tbody>
</table>

**Hypothesis (Why is the problem occurring?):**
Natasha is unable to read words fluently, thereby affecting her comprehension. She is also distracted frequently, which affects her fluid reading.

**The difference between current performance and expected performance will be reduced if:**
Natasha increases her reading fluency by increasing her sight word vocabulary through 1:1 intensive instruction 5 days/week.

**Performance Goal (from C above):**
Natasha will increase her word vocabulary by 10 words a week, in 6 weeks (95 of 100 words).

Revised Sept 2007
NC Department of Public Instruction  
Tier III Problem-Solving

Student Name: Natasha Joy  
Date: 11/19/07  
Target Area(s) for Instruction/Intervention: Vocabulary  
Date/Time for Review Mtg: 01/21/07  
Goal/Prediction/Explanation: (expected growth, timeframe, behavior, criterion) Increase vocabulary by 10 words per week (95 out of 100 words)

<table>
<thead>
<tr>
<th>Procedures (Instructional Strategies):</th>
<th>Arrangements (Where/Frequency/Length of Time/Materials):</th>
<th>Person(s) Responsible:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Natasha will receive instruction in reading foundation 5 times a week, 1:1, for 45 min. a day</td>
<td>Natasha will participate in the RF group in her classroom conducted by the Tutor.</td>
<td>Reading Tutor</td>
</tr>
</tbody>
</table>

*Measurement Strategy (Method of data collection, measurement conditions, monitoring schedule):  
Word recognition data will be collected 2 times each week.

Evaluation Plan  
(Frequency of data collection, strategies to be used to summarize data for evaluation, number of data points or length of time before data analysis/decision rule):  
If Natasha falls below her goal line for three consecutive data points, the intervention will be changed

* Attach graph or other visual representation

Revised Sept 2007
NC Department of Public Instruction  
Tier III Problem-Solving

Student Name: __Natasha Joy__  
Date: __01/19/08__  
Area(s) targeted for Instruction/Intervention: __Vocabulary__

<table>
<thead>
<tr>
<th>Baseline Data (from Tier III page 2)</th>
<th>Current level of Performance (after intervention)</th>
<th>Did the student meet the performance goal (bottom of page 2) that was set?</th>
</tr>
</thead>
<tbody>
<tr>
<td>35</td>
<td>95</td>
<td><strong>yes</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current level of Performance (after intervention)</th>
<th>Benchmark (long-term goal)</th>
<th>Difference between current level of performance (after intervention) and benchmark (long-term goal)</th>
</tr>
</thead>
<tbody>
<tr>
<td>95</td>
<td>95</td>
<td>0</td>
</tr>
</tbody>
</table>

Check as appropriate:  
- _X_ Area targeted for instruction/intervention is no longer an area of concern  
- Continue instructional/intervention plan  
- Redesign or modify instructional/intervention plan  
- Move to Tier IV

The following have been conducted. Results were considered and documentation is included for Tier III Problem-Solving:  
- Speech Language Screening  
- Social Developmental History  
- Observation by an independent observer

Signature  

Position  

Date  

Revised Sept 2007
Public Schools of Robeson County
Student Services Management Team

Purpose

Student Services Management Team is a school-based problem-solving group. The primary purpose is to design useful interventions for maximizing the student’s potential in his/her present environment. The major functions of the Student Services Management Team are to:

- Identify behavior problems
- Determine academic challenges
- Distinguish social and emotional issues
- Recognize developmental delays
- Collect data in the natural environment
- Implement interventions based on data
- Monitor progress
- Revise/extend interventions
- Learn to self-correct for improved performance outcomes

The Student Services Management Team Process

1. The focus is on problem solving... not as a mechanism for referring students for special education services.

2. The focus is on changing the environment to assist children... not on student’s problems.

3. Assessment focuses on what a student knows and can do... not on student’s weaknesses.

4. Assessment is functional and diagnostic in nature and can be performed by any teacher... not standardized instruments that only psychologists can use.

5. Linked to North Carolina Standard Course of Study (Standards, Instructional Models and Student Plan)... not an avenue to refer children for special education services.

6. Interventions based on data and research on student needs... not on a guessing game.

7. The plan and process is developed using strong meaningful interventions connected to data generated from informal assessment... not several weak interventions generated through one brainstorming session.
8. Monitoring and evaluation components determine effectiveness... *not* relying on verbal information from teachers and/or school personnel.

- Rather than saying John is disorganized, we would ask under what conditions is John organized or disorganized.

Consider the following when referring students to SSMT:

Does the child display immature behaviors? If immaturity is a major concern, support strategies and recommendations should be implemented in the classroom, school-wide setting, and home. Usually veteran teachers have developed expertise in areas such as child development, developmental delays, and cognitive development. Experienced teachers should be used as a resource concerning emotional development and cognitive performance.

When students demonstrate inappropriate social/emotional behaviors or academic lag, the origin of these characteristics and/or skills may be environmental. If the student has not received appropriate stimulation and nurturing, developmental delays are probable. The child should be provided opportunities to correct those delays in the classroom and recommendations might be suggested to caregivers—in an atmosphere that reflects reassurance and encouragement. Remember to always discuss the student’s strengths as well as noted weaknesses during conferences. A plan should be developed with the parents/caregivers as a critical part of the team. School personnel can support parents/caregiver by discussing structure which should provide consistent routines through the school week, viewing/reading books in the home, and positively interacting with children on a daily basis.

Also, please consider life experiences and opportunities of the student. The committee should consider the following—has the student:

- experienced multiple teaching styles; has the student’s learning style been identified
- participated in multiple academic and social environments
- participated in cultural experiences and/or social classes different than his/her own
- experienced affirmative interaction and stimulation as a consistent approach

Does the student have strengths in other areas—

- putting things, equipment, blocks together
- formulating thoughts or reasoning abilities (cognitive processing)
- extremely neat in handwriting and/or coloring

Who should serve as a member of the SSMT committee? The SSMT is one of the most essential committees in the school. The team is responsible for discussing issues concerning children, making recommendations, and implementing decisions. The team must be aware of educational, environment, and social resources, strategies, and recognize how to develop trusting relationships. The members should be centered and understand the significance of diversity and environmental compositions. Each school team may vary, but team members to consider include:
ELEMENARY READING

PROGRAMS

Level I  Reading First

Level II  Fast Forward
          21st Century After School Program

Level III Language
            Lindamood-Bell
ELEMENETARY MATH

PROGRAMS

- County Adopted Textbook I
- Accelerated Math II
- Online Math Lesson Plans I
- Singapore Math I
- Study Island II
- I-Succeed III
- Software (Math) – Define Essential Skills
- SRA
- Touch Math III
- Hands-on-Equations II
- “Works” Programs I
- Navigating Through I......
- The Problem Solver I

ELEMENETARY MATH

STRATEGIES

- Math Superstar I
- Problem of the Day (CCS) I
- Cognitively Guided
- Instruction (CGI) I
- NCPIMS Strategies I
- Manipulative Kits/Calculators I
- Super Source
- Thinking Maps/Graphics Organizers I

- Music CDs/Tapes I
- Math & Literature Integration
- Guided Math Groups II
- Small Group Math Instruction I
- Strategies Notebooks I
- Vocab Word Webs I
SECONDARY READING PROGRAMS

Fast Forward II & II
Study Island II
Wilson III
Ladders to Literacy II
BRIDGES (Prentice Hall) I & II
Read 180 degree II
America’s Choice II
Earobics II & III
Houghton Mifflin Reading I
Accelerated Reader I
Read Naturally II
Read First II
SRA Reading Library II
School Island II
Light Span II
Thinking Maps I
Inspiration/Kidspiration II
CORE I & II
Sandy Rdg II & III
Voyager Rdg II & III
Pass Key I & II
READING
SECONDARY STRATEGIES

- Graphic Organizers-I
- PALS (Peer Assisted Learning Strategies)-II
- Paired Reading-I
- Reciprocal Teaching-I
- Direct Instruction-I
- Thinking Maps-I
- Guided Oral Fluency-II
- Strategies for Six Syllable Types-II
- Soaring Through Success (EOC English I)-I
- Secondary Literacy Strategies-I
- Strategic Reading-I
- Choral Reading-II
- Reading in the Content Area-I
- Repeated Reading-II & III
- Reading Across Curriculums-I
- Memorization Strategies-I
- Marzzano's Strategies-I
- CLC-I & II
- SRA
- QAR
- FCCR Website-II
- Academy of Reading-I
- DEAR-I
- DOL/WODY bgp-I
- Word Walls-I
- Mental Mados-I
- Intervention Central-I, II, & III
Elementary Math Programs & Strategies

Level IV

Level III
Touch Math
I-Succeed
Number Worlds
(SRA)

Level II
Guided Math Groups
Hands-On Equations
Study Island
Accelerated Math
Ladders
Gourmet Curriculum

Level I
NCSC
CCS Task Analysis/Pacing Guide
Math Superstars
Problem of the Day (CCS)
CGI (Cognitively Guided Instruction)
NCPIMS Strategies
Manipulative Kits
Calculators
Super Source
Thinking Maps
Graphic Organizers
Music CD’s Tapes
Math & Literature Integration
Small Group Math Instruction
Strategies Notebook

Vocab Word Webs
Small Group Math Instruction
Strategies Notebook
Vocab Word Webs
County Adopted Textbook
Online Lesson Plans
Singapore Math
“Works” Program
Navigating Through
 ..........Programs
The Problem
Tom Snyder Products
SECONDARY MATH

Programs

- Trans. Math; TII; TIII
- Alg. Thinking; I
- T.A.M.S.; I, II
- Study Island; II
- School Island; II
- Number Worlds; II, III
- Acc. Math; II
- Ramp UP; I
- Peterson’s SAT Component; II
- Pass Key; II
- Textbook; I, II
- Lightspan; II
- AVID; II
- I Can Learn: I
- Plato Lab; II
- Hand-held Device; II
- I-Instruction; II
  (Click-Click)
- Educaide Software
- Graphic Organizers
- Gourmet Curriculum

Strategies

- TI-Navigator 2
- Touch Math 3
- NC Man. Kit 1 2 3
  (Fraction Kit)
- Hands-on-Equations 2,3
- Peer Tutors 2
- On-Line Textbook
- Resources 1, 2
- Remediation 2
- Mental Math I
- Growth Test
ELEMENTARY READING

STRATEGIES A-Z

Level I

- Thinking Maps/Graphic Org.
- Creating Great6 Classrooms Strategies

Brain Compatible Strategies

- Cooperative Learning/Active Engagement Strategies
- Interventioncentral.com Strategies
- FCCR Strategies

Mnemonic Devices

- Multisensory Techniques
- CCS Centers/Stations Supporting 5 Domains Of Reading (Elem. Website)

Lit. Framework

- Marzano’s Question Stems
- Home-School Connection (at home reading)
Purpose

With the revision of the Individuals with Disabilities Education Improvement Act in 2004 and the approval of the North Carolina Department of Public Instruction’s Policies Governing Services for Children with Disabilities in November 2007, research-based interventions are now required prior to determining eligibility for special education and related services in some areas of disability. In addition, a child must not be determined to be a child with a disability if the determination is based on a lack of appropriate instruction in reading, including the essential components of reading instructions as defined in section 1208(3) of the Elementary and Secondary Education Act (ESEA), lack of appropriate instruction in math, or limited English proficiency. This document has been prepared to assist school staff in finding and implementing research-based interventions for students who may have a disability. If the interventions are successful without specialized instruction, conditions, adaptations or significant modifications, the student can be educated in the general curriculum and the IEP Team may not find the student eligible for special education and related services.

Required Screenings and Evaluations NC 1503-2.5(d)

Prior to determining eligibility in the areas of Serious Emotional Disability, Intellectual Disability (if there is no previous diagnosis of an intellectual disability), Other Health Impairment, Specific Learning Disability, and Traumatic Brain Injury research-based interventions must be used and the results documented.

**Serious Emotional Disability (SED or ED):** Two scientific research-based interventions to address behavioral/emotional skill deficiency and documentation of the results of the interventions, including progress monitoring documentation.

**Intellectual Disability (ID):** When there is no previous diagnosis of an intellectual disability, two research-based interventions to address academic and/or functional skill deficiencies and documentation of the results of the interventions, including progress monitoring documentation.

**Other Health Impairment (OHI):** Two research-based interventions to address academic and/or behavioral skill deficiencies and documentation of the results of the interventions, including progress monitoring documentation.

**Specific Learning Disability (SLD):** Two research-based interventions to address academic skill deficiencies and documentation of the results of the interventions, including progress monitoring documentation.

**Traumatic Brain Injury (TBI):** Two research-based interventions to address academic and/or behavioral skill deficiencies and documentation of the results of the interventions, including progress monitoring documentation. This may be waived for students who have been medically diagnosed with TBI and who have received medical and/or rehabilitative services in a medical or rehabilitation program or setting within the previous twelve months.

Research-based Interventions

Research-based interventions are strategies, teaching methodologies and supports that have been shown through one or more valid research studies to help a student improve academic, behavioral/emotional or functional skills. The interventions used prior to determining eligibility for special education and related services must be designed to address the skill deficiency of the particular individual student. Multiple sites on the web have information about research-based interventions.
Web Resources for Research-based Interventions

http://core.ecu.edu/psyc/rileytillmant/rileytillman.html This website has a link to an Evidence Based Intervention Manual on the left hand side of the home page. The manual contains specific information on how to implement research based academic and behavioral interventions. It was developed as a class project at East Carolina University under Dr. Chris Riley-Tillman.

http://www.k8accesscenter.org/training_resources/programsandpractices.asp Of particular help on this site is the document “Strategies to Improve Access to the General Education Curriculum.”

http://www.k8accesscenter.org/training_resources/universal_design.asp This site has a lot of information about Universal Design to improve learning of all students. Some of the strategies might be used with an individual student.

http://www.k8accesscenter.org/training_resources/default.asp This site has content specific information.

http://research.nichcy.org/subject.asp?SubjectID_x10x (There is a small “I” after Sub) This site has twenty-one research articles on Teaching Methods. Some can be adapted for individual students.

http://serge.ccsso.org This site has resources for teachers in general education working with students with disabilities. Some of these can be used as interventions.

http://www.interventioncentral.org Intervention Central offers free tools and resources to help school staff and parents to promote positive classroom behaviors and foster effective learning for all children and youth. The site was created by Jim Wright, a school psychologist and school administrator from Central New York.

http://www.promisingpractices.net/ This site contains information about practices and programs that help with behavioral and emotional skill development. Although most of the programs are for groups of students, some may be adapted to individual students.

http://www.colorado.edu/espv/ This site contains programs that are considered effective violence prevention programs. Although most of the programs are for groups of students, some may be adapted to individual students.

http://childtrends.org/lifecourse/programs_ages.htm This site contains information about practices and programs that help with behavioral and emotional skill development. Although most of the programs are for groups of students, some may be adapted to individual students.

http://www.unl.edu/csi/study.shtml This website from the University of Nebraska allows access to some empirically-based cognitive strategies. Strategies are targeted at promoting a child’s awareness of cognition during learning. There is a related review about self-regulation and self-monitoring on the site as well.

http://www.autismnetwork.org/modules/behavior This website from the University of Oregon of activity-based interventions (ABI) is appropriate for young children with disabilities. There are interventions in the following broad areas: academic, behavior, communication, environmental, sensory and social skills. Some specific links included are contingency management, stress management, discrete trial, toilet training etc.

http://www.circleofinclusion.org This is the University of Kansas Circle of Inclusions Project site. This site also has many academic learning strategies.
http://www.newhorizons.org/strategies/front_strategies.html On website is information about some of the best researched and the most widely implemented methods of helping all students to learn more successfully. The information includes a description of how the teaching and learning strategies work, where they have been applied, results, and where to find further information from experts in the field, books, websites, and other resources.

http://www.clas.uiuc.edu/ This site from the CLAS Institute, University of Illinois at Urbana Champaign, has research-based motor and language skills interventions.

http://www.free-reading.net This site is the Free Reading website. Free Reading is a high-quality, open-source free reading intervention program for grades k-3.

http://www.centeroninstruction.org This is the website for the Center on Instruction which contains collection of scientifically based research and information on K-12 instruction in reading, math, science, special education, and English language learning. Part of the Comprehensive Center network, the Center on Instruction is one of five content centers serving as resources for the 16 regional US Department of Education Comprehensive Centers.

http://www.ed.gov/about/bdscomm/list/mathpanel/index.html On March 13, 2008, the National Mathematics Advisory Panel presented its Final Report to the President of the United States and the Secretary of Education. Copies of these groundbreaking reports, rich with information for parents, teachers, policy makers, the research community, and others, can be accessed at this website.

http://www.ed.gov/inits/Math/silver.html Results from the Third International mathematics and Science Study (TIMSS) are found on this website. Teachers, principals, parents, policy makers, and others wishing to improve mathematics education in the middle grades can learn much from TIMSS by: reviewing some major TIMSS findings related to grades 7 and 8; considering these findings in light of other relevant research on mathematics curriculum content, classroom instruction, and student achievement; and then pondering the lessons from TIMSS and related research about what must be done to ensure that US students have access to better mathematics education that will prepare them for the challenges of today and tomorrow.

Progress Monitoring

“Progress monitoring is a scientifically based practice that is used to assess students’ academic performance and evaluate the effectiveness of instruction. Progress monitoring can be implemented with individual students or an entire class. To implement progress monitoring, the student’s current levels of performance are determined and goals are identified for learning that will take place over time. The student’s academic performance is measured on a regular basis (weekly or monthly). Progress toward meeting the student’s goals is measured by comparing expected and actual rates of learning. Based on these measurements, teaching is adjusted as needed. Thus, the student’s progression of achievement is monitored and instructional techniques are adjusted to meet the individual students learning needs.”

There is much more information about progress monitoring on the website.

http://www.studentprogress.org/progressmon.asp#2