Feedback on 704 KAR 3:090 and KDE Responses

Date	Feedback	KDE Response
10/9/12	Page 3 line 9 states "meets the needs of the student" The other pieces in this section numbers 1-6 seem to be more specific and clear cut in their nature. How would you define "meets the needs of the student" in a measurable fashion to ensure that everyone is following the spirit of the regulation? Is there another way to word this that would make it clearer?	Statement will be left in the regulation. Guidance will be provided on making sure interventions meet the area of the need that the screener and additional data have indicated is the student's area of need.
10/9/12	NOTE: This responder just had a few clarifying questions, not actual feedback necessarily on the regulation. Reading these documents left me with a couple questions: 1) Are multiple tiers required if the student is referred and RTI is being provided during the referral? Will one intervention cover the requirement for RTI as part of the referral? 2) Is this all kids K-3 or are special education students exempted? Just need to clarity. I hope this makes sense.	Guidance will be provided.
10/14/12	Section 2. (C) (5) uses the term "qualified educator". Could that term be added to the definitions section so that schools and districts know what makes the person providing the intervention "qualified"? Isn't it somewhere else written as "a person trained to" instead of "qualified"?	In order to allow flexibility for districts in assigning staff, KDE is recommending using the phrase, "educators most qualified to deliver the intervention services". In some cases a specially trained interventionist may be needed for intensive interventions. However, the student's need would determine the level of qualification needed.

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10/31/12	Also, I'd just like to point out that it may be an area of concern that there are very few resources out there for writing instruction. I wish someone would compile a document with writing suggestions. I looked for a few years and found very little and nothing that great. This regulation is going to positively impact kids early. I love it! I finally had a chance to read through all of this. It is all very clear and will be a great tool in establishing appropriate interventions and then hopefully having the opportunity to adapt or adjust them after receiving the response to intervention data. I noticed there is no mention of parent involvement, except to deliver the results of the intervention. Is there a way to make a parent component in the intervention, particularly in K-3 and in the behavior plans? I know we can't regulate parent involvement, but I think they are an important component to improved learning outcomes. Just my two cents!	The K-3 Program Review makes reference to ongoing collaboration with parents in one of the indicators. KDE agrees this is an important issue. On page 3 in Section 2 (4), "individual student reports, that summarize the student's skills in mathematics, reading, writing, and the students' behavior, and any intervention plans and services being delivered shared with the parents of each student in kindergarten through grade three (3)".
10/9/12	I think this will clear some things up for districts.	
11/5/12	KCM, in general, is requesting that KDE specifically spell out that interventions should be provided "by a highly-trained intervention specialist" or by "reading, mathematics or behavior intervention specialists highly trained in diagnosing	In order to allow flexibility for districts in assigning staff, KDE is recommending using the phrase, "educators most qualified to deliver the intervention services". In some cases a specially trained interventionist may be needed for intensive

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	and addressing student need." Section 1, subsection 8: What is a benchmark skill?	interventions. However, the student's need would determine the level of qualification needed. Guidance will be provided.
	Section 1, subsection 8: The grade level expectations are somewhat graduated, so how can this be clarified to specify readiness for the grade level content (which would also be difficult to define). You might think about how to word this so that, for example, schools would not screen in September for the content to be learned throughout the coming year. Rather, they would possibly start the year verifying that the prior year's content has been mastered.	Guidance will be provided.
	Section 1, subsection 9: Define qualified educator with a nod to heightened levels of training and expertise for providing most intensive interventions. In primary grades, the certified educators are generalists or special educators, neither of which have sufficient pedagogical content knowledge to deal with the complexity of early numeracy development. At a minimum the interventionist should have at least 65 hours in a KDE-approved program conducting tier 3 interventions.	
	Section 2, subsection 1, a: Again, they want it noted that the intervention should be "with increasing levels of teacher expertise for delivering content or behavioral interventions, in conjunction with more intensive needs of the student."	
	Section 2, subsection 1, subsection c, 5 should	

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	state: "With heightened levels of training and expertise in alignment with higher levels of student need. Or, this could be defined above. HB69 requires KDE collaboration with other agencies to ensure teachers are prepared to deliver interventions. This law needs some guidance as to the plan for intended collaboration and guidelines for the RTI PD providers.	KDE will continue to collaborate with other agencies to ensure teachers have the resources they need to deliver interventions.
	Section 2, subsection 1, subsection c, 6 should state: [related to progress monitoring (PM)] Possibly "no more than 5% of the intervention time and providing information that is useful in instructional planning." I suggest this because current PM practices in some places are eating up about 20 percent of the intervention time and frequently do not give helpful information for instruction. Considering that PM for mathematics intervention, according to the research review by the Institute for Educational Science, has a low level of effectiveness, it [PM] is being overemphasized in many places. Certainly it [PM] is important, but should be formative in nature and should be not be the predominate RTI practice.	KSI guidance has suggested providing formative assessment without sacrificing unnecessary intervention instructional time. KDE defers to district and/or school policy for frequency.
	Section 2, subsection 6, subsection e, 2: Would this be anecdotal, checklists, videotaped instruction or written work samples? Schools may	Guidance will be provided.
	want some examples.	Guidance will be provided.
	Section 2, subsection 6, subsection e, 3: Can you add an i.e. here, something like monthly for most intensive and quarterly for targeted interventions?	Guidance will be provided.
	Section 2, subsection 6, subsection e, 4: Should	

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	frequency similar to schedule of formal evaluation by committee be provided? Certainly, schools should have freedom to decide what's best, but some may appreciate a suggestion of best practice.	Guidance will be provided.
11/1/12	Feedback and questions on the K-3 Intervention Bill from the Advisory Council Meeting on 10/26/12: * What does evidence look like? * Is the submission of evidence per building or per district? * Who submits evidence? DoSE? Instructional Supervisor? * What type of student report will be going out to parents? (Report Card?) * Does submission include preschool? SLP, RTI, VI, OI, HI? * Is there a waiver process to request a change in the order of implementation, such as behavior before writing or math before writing?	Guidance is being provided through the K-3 Program Review Implementation process.
11/9/12	KDE may need to define "qualified educator" (page 3, line 11). It depends at what tier of instruction the intervention is to be provided. At the basic, tier 1 level, of course, certification as a teacher would be a minimum. For tier 2, certification as a specialist (reading, math, etc. depending on the problem). Things get more complicated beyond that, as I'm sure you know. Models across the nation vary. For some, tier 2 is in-class intervention with, say, a reading specialist	In order to allow flexibility for districts in assigning staff, KDE is recommending using the phrase "educators most qualified to deliver the intervention services". In some cases a specially trained interventionist may be needed for intensive interventions. However, the student's need would need to determine the level of qualification needed.

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	assisting the classroom teacher, while tier 3 is pull-out intervention with the same kind of specialist. Elsewhere, tier 2 is pull-out with a specialist, but tier 3 is special education. But, I'd be reluctant to send a kid with a reading difficulty to a special educator who may have less training and expertise with reading and its variability than do even regular classroom teachers, and there is a lack of compelling evidence that any educator with little training can be effective with the most difficult but reading-specific cases. On the other hand, they are well suited (and, indeed trained) for general severe learning disability. If we can be of any service in future discussions. Please let me know.	
11/12/12	Section 1, page 1, line 18: include the words "cognitive differences".	Learning differences has been included.
	Section 1, page 2, line 1: Substitute "scientifically-based research" means classroom practices for which there is strong (delete "or moderate") evidence of success.	Change made.
	Section 1, page 2, line 14: "Targeted intervention" means the use of screening date for designing instructional interventions provided in addition	Change made.
	Section 1, page 2, line 16: After expectation, insert "in reading, writing, mathematics or behavior" has not been met.	Change made.
	Section 1, page 2, line19, insert the words "cognitive differences" before class attendance.	Learning differences has been included.

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	Section 4, page 4, line 5, after the word data, insert "that reflect how many students are at risk for aphasia, dyslexia, dyscalculia, dysgraphia and behavior problems".	Change was not made. That data collection is not a requirement of HB 69 but will be part of guidance to districts.
	I have made these suggestions based on reference to HB 69.	