

Social/Emotional/Behavioral RtI Checklist-Tier II

*Please √ if completed, N/A if not applicable—Attach any pertinent information concerning items below

Strategic/targeted intervention and supplemental instruction for social/emotional/behavioral concerns implemented with integrity which includes identification and documentation of:

_____ Specific deficit skill area/target skill: _____

_____ Scientifically research-based interventions used: *(list interventions & cite references)* _____

_____ Baseline data: Start date: _____

(Attach copy of baseline data)

_____ Resources needed for implementation/materials/training: _____

_____ Who will conduct the intervention: _____

_____ Where will the intervention occur: _____

Number of students in group: _____

_____ Frequency/intensity of intervention: Days per week _____

Length of intervention session: _____

_____ Method of measurement: What is the progress monitoring tool? _____

Is it appropriate? _____

_____ What criterion will determine a successful response to intervention: _____

_____ Who will monitor the progress: _____

_____ Who will chart the progress: _____

_____ Who will help ensure intervention is carried out as planned/intervention integrity: _____

_____ When will the team meet again to discuss progress (date): _____

Document dates of meetings: _____

_____ Does the intervention or criterion need to be modified: _____

_____ Progress monitoring conducted at reasonable intervals (specify dates) _____

(Attach copy of progress monitoring data)

_____ Graphical representation of progress in decreasing target behavior(s) *(attach)*

_____ Graphical representation of progress in increasing replacement behavior(s) *(attach)*

_____ Parent notified of progress at least once per grading period *(attach documentation)*

_____ Parent notified of concern(s) and informed of Tier III intervention plan if student does not meet intervention criterion *(attach documentation)*

_____ Receipt of informed parental consent for services if the decision is made to seek support services

Social/Emotional/Behavioral RtI Checklist-Tier III

*Please √ if completed, N/A if not applicable—Attach any pertinent information concerning items below

Intensive intervention and supplemental instruction for social/emotional/behavioral concerns implemented with integrity which includes identification and documentation of:

_____ Functional behavioral assessment checklist **attached** Date: _____

_____ Specific deficit skill area/target skill: _____

_____ Scientifically research-based interventions used: (*list interventions & cite references*) _____

_____ Baseline data: Start date: _____
(*Attach copy of baseline data*)

_____ Resources needed for implementation/materials/training: _____

_____ Who will conduct the intervention: _____

_____ Where will the intervention occur: _____

_____ Frequency/intensity of intervention: Days per week _____
Length of intervention session: _____

_____ Method of measurement: What is the progress monitoring tool? _____
Is it appropriate? _____

_____ What criterion will determine a successful response to intervention: _____

_____ Who will monitor the progress: _____

_____ Who will chart the progress: _____

_____ Who will help ensure intervention is carried out as planned/intervention integrity: _____

_____ When will the team meet again to discuss progress (date): _____
Document dates of meetings: _____

_____ Does the intervention or criterion need to be modified: _____

_____ Progress monitoring conducted at reasonable intervals (specify dates) _____

(Attach copy of progress monitoring data)

_____ Graphical representation of progress in decreasing target behavior(s) (*attach*)

_____ Graphical representation of progress in increasing replacement behavior(s) (*attach*)

_____ Parent notified of progress at least once per grading period (*attach documentation*)

_____ Parent notified of concern(s) and informed of modifications to Tier III intervention plan if student does not meet intervention criterion (*attach documentation*)

_____ Receipt of informed parental consent for services if the decision is made to seek support services.

_____ Refer to SATeam if data analysis indicates lack of measureable progress.