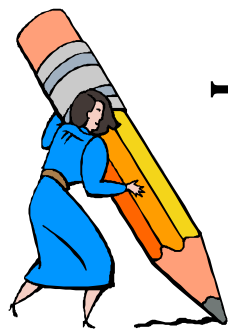# School-Based Intervention Teams:

Meeting Forms & Related Resources

(October 2010)

Foreword

This booklet contains the meeting forms and related resources used by the Syracuse (NY) City Schools School-Based Intervention Team (S-BIT) Project.

The following people served on the team that authored or provided feedback about these resources (listed in alphabetical order): Emily Bajish, Elizabeth Bernardone, Dr. Kristi Cleary, Sarah Fleury, Val Gray, Amy Green, Sarah (Hough) Hooser, Leslie Jurkiw, Diane Kucharski, Peter McMahon, Chris Miller, Stephanie Pelcher, Angelo Tubolino.

In addition to those listed above, contributors to previous S-BIT forms and resources have included: Dr. Seth Aldrich, Mary Ellen Andrews, Dr. Scott Ardoin, Dr. Sheila Clonan, Joanne Downes, Ed Erwin, Kelly Malone, Dr. Jim McDougal, Rocco Nalli, Kim Nelson-Chapin, Casey Peck, Kathy Solan, Jim Wright, Dave Zawadzki, Dr. Thomas Zino.

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Special thanks to Chris Miller, Sarah (Hough) Hooser and Angelo Tubolino our intrepid editors!

Section I: Student At Risk Referral Form

Purpose & Guidelines for Use:

The referring teacher completes the Student At Risk Referral Form prior to the initial S-BIT meeting. The S-BIT case liaison may want to assist the teacher in completing the form and meet briefly with the teacher before the initial meeting to collect additional information about the instructor's concerns.

Student At-Risk Referral Form

General Information

Student Name:_____

Referring Teacher(s): _____

_____

Parent/Guardian: _____

To be completed at meeting
ID Number: _____
Date of Birth:_____
Referral Date: _____
Address: _____
Phone: _____

How and when was parent notified of referral: _____

Reason for Referral (Primary Concern):

_____Academic   _____Behavioral   _____Emotional   _____Medical

Please describe the specific concerns prompting this referral. What makes this student difficult to teach? List any academic, social, emotional or medical factors that negatively impact the student's performance.

_____
_____
_____
_____

How do this student's academic skills compare to those of an average student in your classroom?

_____
_____
_____

*In what settings/situations does the problem occur **most** often?*

_____

*In what settings/situations does the problem occur **least** often?*

_____

What are the student's strengths, talents or specific interests?
1. _____
2. _____
3. _____

Parent/Guardian Contact Prior to Referral

_____Phone Call   _____ Note Home   _____Conference   _____Home Visit

Interventions
1. Begin date _____   End date _____   Person(s) responsible _____

What have you tried to do to resolve this problem?

_____

_____

_____

How did it work?

_____

_____

_____

2. Begin date _____   End date _____   Person(s) responsible _____

What have you tried to do to resolve this problem?

_____

_____

_____

How did it work?

_____

_____

_____

3. Begin date _____   End date _____   Person(s) responsible _____

What have you tried to do to resolve this problem?

_____

_____

_____

How did it work?

_____

_____

_____

What would be the best day(s)/time(s) for someone to observe the student having the difficulties that you describe above? (Please attach a copy of the student's daily schedule, if available):

_____

Please provide any additional pertinent information such as this student's most current

report card, schedule and attendance record and return with referral.

Section II: S-BIT Introductory Teacher Letter & Case Liaison Checklist

Purpose & Guidelines for Use:

S-BIT Teams can use this Introductory Teacher Letter as a model to write their own invitation to teachers who are referring to S-BIT for the first time. The Case Liaison Checklist provides a simple reminder about the essential responsibilities of the S-BIT Case Liaison role.

S-BIT Teacher Introductory Letter: Model

Dear Teacher:

Currently the S-BIT meeting for _____ is scheduled to occur on _____. The purpose of S-BIT is to develop an intervention(s) that will promote improvements in a student's or classroom's behavior and/or academic performance, discuss ways to evaluate whether the intervention is effective, and provide you with resources to conduct and evaluated the intervention.

Prior to the meeting, we ask that you contact the student's parent/guardian to inform them of the S-BIT meeting and complete a teacher behavior report card, recording at least 2 instructional weeks (prior to the initial meeting) of behavior. The information that you provide on the teacher behavior report card will later help us to establish goals and evaluate the effectiveness of the intervention.

Please be prepared to discuss the following things during the meeting:
- ❖ the behavior/academic problems for which you are referring the student
- ❖ the student's academic and social strengths and weaknesses
- ❖ select two or three behaviors or academic areas for which you wish the team to help you develop interventions
- ❖ for behavioral cases: discuss how often the behaviors occur and/or how long they last
- ❖ discuss when (before or after an event, subject, instruction, type of request/command, time of day) or with whom (teacher/peer) the behavior is more likely to occur
- ❖ explain interventions that you have already implemented and why they did or did not work
- ❖ estimate the level that the student can perform academic work independently and the level at which he/she is actually receiving instruction
- ❖ incentives for which the student may be willing to work

An S-BIT Teaching Assistant (S-BIT TA) will be coming into your classroom during the next week to collect additional information, such as a classroom observation and/or curriculum based assessment in identified areas of concern. Your case-liaison, _____, should be meeting with you to discuss your referral and to help you in understanding the teacher behavior report card. If your case-liaison is not able to meet with you prior to the meeting, please do your best to complete the teacher behavior report cards prior to the meeting. Following the S-BIT meeting, your case-liaison will meet with you again to insure that you have all the resources necessary to implement and to monitor the effectiveness of the intervention. Please see him/her at anytime that you need additional resources or have found that the intervention is becoming ineffective or has become too difficult to implement.

Sincerely,

Your Building S-BIT Team

Essential Steps for the Case Liaison

As soon as you are assigned as the Case Liaison to a student's case, you are the primary colleague and support throughout the process. This includes the responsibilities outlined on the following checklist:

S-BIT
Case Liaison Checklist

PRIOR to initial meeting:

___Review the S-BIT referral form to make sure teacher has provided all necessary information.

___Meet with the referring teacher at _least 2 1/2_ weeks prior to the initial S-BIT meeting to complete the following tasks:

   ___Help the teacher make any necessary changes to the S-BIT referral.

   ___Explain the Teacher Behavior report Cards to the referring teacher.

   ___Complete the Case Liaison Problem Specification Sheet.

   ___Return the **Case Liaison Problem Specification Checklist** to your S-BIT TA._(At least 2 weeks before the meeting)_

Two days before the meeting:

___Make sure the Teacher Behavior Report Cards have been returned to the S-BIT TA or the coordinator.

After the initial meeting:

___Check in with the referring teacher on a bi-weekly basis and complete the **Case Liaison Follow-up** form.

___Bring the **Case Liaison Follow-up** form to the follow-up meeting.

Remember:

*Provide the S-BIT TA or the coordinator with any additional information you receive from the teacher.

*Always be available to the referring teacher to discuss any concerns that may arise.

Case Liaison Problem Specification Checklist
(Limit of <u>2</u> primary areas)

Student: _____   Teacher: _____

Case Liaison: _____

Return by: _____ to S-BIT TA: _____

Academic Readiness:

_____ recall of personal information

_____ shape recognition

_____ color recognition

_____ 1:1 correspondence

_____ number identification

_____ upper case letter identification

_____ lower case letter identification

_____ counting

_____ recitation of alphabet

_____ other areas: _____

Language:

_____articulation/intelligibility

_____ expressive language

_____ receptive language

Reading:

_____ pre-literacy skills

specify:

_____ sight words

_____ fluency: (accuracy & quickness)

specify:

_____ comprehension

specify:

Math:

_____ number concepts

  specify:

_____ number recognition

  specify:

_____ calculation accuracy

  specify:

_____ calculation fluency

  specify:

_____ applications

  specify:

_____ word problems

  specify:

Writing:

_____ fine motor or handwriting

  specify:

_____ conventions (punctuation, capitalization)

  specify:

_____ language (sentence structure, grammar, vocabulary)

  specify:

_____ construction of story (prose, action, sequence, theme)

  specify:

_____ fluency

  specify:

_____ spelling

  specify:

Behavior:

Description: (type, frequency, duration, setting)

_____

_____

_____

Please complete and return to your S-BIT TA AT LEAST 2 weeks before the initial meeting!

S-BIT   Case Liaison Follow-up

Student: _____ Teacher: _____
Liaison: _____ Initial meeting date: _____

Week 2:
Are the interventions being implemented as designed at the meeting? Y/N
If not, why?

_____
_____

Are there additional supports/resources that are needed?

_____
_____

Do you feel the intervention(s) is effective? Have you seen progress?

_____
_____

Is the frequency of the intervention implementation being recorded? Y/N

If issues are not resolved, please inform the Coordinator

Week 4:
Are the interventions being implemented as designed at the meeting? Y/N
If not, why?

_____
_____

Are there additional supports/resources that are needed?

_____
_____

Do you feel the intervention(s) is effective? Have you seen progress?

_____
_____

Is the frequency of the intervention implementation being recorded? Y/N

If issues are not resolved, please inform the Coordinator

Week 6:

Are the interventions being implemented as designed at the meeting? Y/N
If not, why?

_____

_____

Are there additional supports/resources that are needed?

_____

_____

Do you feel the intervention(s) is effective? Have you seen progress?

_____

_____

Is the frequency of the intervention implementation being recorded? Y/N

<u>If issues are not resolved, please inform the Coordinator</u>

Week 8:

Are the interventions being implemented as designed at the meeting? Y/N
If not, why?

_____

_____

Are there additional supports/resources that are needed?

_____

_____

Do you feel the intervention(s) is effective? Have you seen progress?

_____

_____

Is the frequency of the intervention implementation being recorded? Y/N

<u>If issues are not resolved, please inform the Coordinator</u>

Week 10:

Are the interventions being implemented as designed at the meeting? Y/N
If not, why?

_____

_____

Are there additional supports/resources that are needed?

_____

_____

Do you feel the intervention(s) is effective? Have you seen progress?

_____

_____

Is the frequency of the intervention implementation being recorded? Y/N

<u>If issues are not resolved, please inform the Coordinator</u>

Week 12:

Are the interventions being implemented as designed at the meeting? Y/N
If not, why?

_____

_____

Are there additional supports/resources that are needed?

_____

_____

Do you feel the intervention(s) is effective? Have you seen progress?

_____

_____

Is the frequency of the intervention implementation being recorded? Y/N

<u>If issues are not resolved, please inform the Coordinator</u>

Section III: S-BIT Initial Meeting Quick Guide

Purpose & Guidelines for Use:

The S-BIT Quick Guide provides summary tips and ideas for running effective initial S-BIT meetings. New team members often keep a copy of the Quick Guide open in front of them during the meeting to refer to whenever they have questions. The Quick Guide is also a useful resource to use when training teachers to serve on
S-BIT Teams.

School-Based Intervention Teams
Initial Meeting
Quick Guide

Step 1: Assess Teacher Concerns: *5 minutes*

Goals:
- The case liaison or facilitator reviews information from the referral form
- Allow the teacher to discuss major referral concerns
-

Sample Questions:
- *Given the information in the referral form, what are specific difficulties that you would like to address today?*
- *How is this student problem interfering with the student's school performance?*
- *What concern(s) led you to refer the student to this Team?*

The S-BIT Team is ready to move on to the next step when:
- Team members have a good understanding of teacher concerns.

Tip:
✓ To save time, the case liaison or facilitator can review information from the Teacher S-BIT Referral Form and summarize the teacher's main points for the team at the start of the meeting. The facilitator can then ask the teacher if he or she has any additional concerns to share.
✓

Step 2: Inventory Student Strengths & Talents   *5 minutes*

Goals:
- Discuss and record the student's strengths and talents, as well as those incentives that motivate the student. This information can be valuable during intervention planning to identify strategies that the student will be motivated to participate in.

Sample Questions:
- *What rewards or incentives have you noted in school that this child seems to look forward to?*
- *What are some things that this student does well or enjoys doing around the classroom?*
- *Please tell us a few of the student's strengths, talents, or positive qualities that might be useful in designing interventions for him or her*
- *What are hobbies or topics of interest for this student?*

The S-BIT Team is ready to move on to the next step when:
- The team has identified personal strengths, talents, and/or rewards that are likely to motivate the student if integrated into an intervention.

Tip:
- The referring teacher may want to meet with the child *prior to* the S-BIT meeting to collect information about those rewards that motivate him or her.

Step 3:Review Baseline Data: *5 minutes*

Goals:
- To get a holistic view of student
- To determine starting point/levels within the academic and/or behavioral areas of concern.

Sample Questions:
- *Where is the student currently functioning according to the information provided?*
- *Is there anything significant in the student's school history that needs to be discussed?*
- *Is or has attendance been an issue?*

The S-BIT Team is ready to move on to the next step when:
- The team has reviewed and discussed all the pertinent background and baseline data.

Tip
- Thorough understanding of the baseline data will be beneficial to goal setting and intervention design.

Step 4: Select Target Teacher Concerns: *5-10 minutes*

Goals:
- Define the top 1-2 teacher concerns in easily observable, measurable terms.
- For behavioral concerns, understand the dimensions of the problem (e.g., the frequency, duration, and/or intensity of the challenging behavior)
- For academic concerns, identify the presence of underlying academic skill deficits, mismatch between student skills and classroom instruction, fluency and accuracy in the area of concern, and work completion.
- For each teacher concern, decide on what functions may help to explain why the student displays the target concerns.

Sample Questions:
- *From the concerns that you have shared with our Team, what are the top one or two problems that you would like us to concentrate on today?*
- *(Academic) What can you tell us about the student's current skill levels, homework and class work completion, attention to task, general motivation?*
- *(Academic) Are there difficulties in fluency and/ or accuracy?*
- *(Behavioral) How long does each behavioral outburst last? About how frequently do episodes occur? How severe are the behaviors that you are seeing?*
-

- *(Behavioral) What kinds of things happen in the room just before the student has an outburst? What do you and other students in the room do during each outburst? What is the outcome for the child after they engage in the problem behaviors?*
- *What do you think is a reason that the student shows the behavior(s) of concern? How does this behavior help the student to get his or her needs met?*

The S-BIT Team is ready to move on to the next step when:
- One or two primary teacher concerns have been established and stated in measurable terms (as behavioral and/or academic difficulties).
- The referring teacher agrees with the selection and definition of the top 1-2 problems.
- The team and teacher agree on possible functions that explain why the academic/behavioral concern is taking place.

Tip:
- ✓ The meeting can run more efficiently if Team members first simply list all teacher concerns about a student and postpone an extended discussion of a particular problem until the teacher has selected that problem as a top concern.

Step 5: Set Academic and/or Behavioral Goals: Set observable, measurable, & realistic goals for change   5-10 minutes

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Goals:
- For each of the academic or behavioral referral concerns:
  - o set ambitious but realistic goals for improvement that are attainable in 8-12 weeks

Sample Questions:
- *Given the student's current functioning at what level would you like to see him/her after an 8-12 week intervention period?*
- *What is a realistic rate of progress for this student?*
- *Is the goal set by the team realistic for this student?*

The S-BIT Team is ready to move on to the next step when:
- Ambitious but realistic student goals for improvement have been set.
- The referring teacher agrees that the outcome goals are appropriate for this student case.

Tip:
- ✓ You may wish to refer to the prescribed Rates of Weekly Progress for each academic area. (e.g.. Fuchs Guidelines)

Step 6: Design an Intervention Plan: *15-20 minutes*

Goals:
- Select at least one intervention that addresses each of the selected referral concerns.
- Spell out the particulars of the intervention as a series of specific steps so that the teacher or other person(s) designated to carry it out can do so efficiently and correctly.
- Note any important additional information about the intervention, including:
    - When and where the intervention will take place;
    - Whether any specialized materials or training are required to implement the intervention;
    - The people who are actually going to carry out the intervention.
    - Determine methods to monitor accurate implementation of the intervention
- Review the intervention(s) with the teacher to ensure that the plan is acceptable to them.

Sample Questions:
- *What intervention ideas would best meet this student's needs?*
- *What is it about this particular intervention that makes it likely to improve the student's behavior or academic functioning in the area(s) identified?*
- *Is there specialized training or materials that you feel are needed to carry out this intervention?*
- *How can our Team assist you [the referring teacher] with the intervention?*
- *How can we utilize the student's strengths to facilitate the effectiveness of the intervention?*
- *What is a simple method to track the accurate implementation of the intervention (e.g., checklist of key steps to be implemented)*

The S-BIT Team is ready to move on to the next step when:
- The referring teacher and team members agree that the intervention:
    - directly addresses the identified concern(s).
    - is judged by the teacher to be acceptable, sensible, and achievable.
    - appears likely to achieve the desired goal.
    - is realistic, given the resources committed.
    - can be expected to achieve the stated goal within the timeline selected.
- A method for tracking the accurate implementation of the intervention has been established.

Tip:
- You may want to invite staff members with expertise in a particular type of referral problem to attend an S-BIT meeting as 'intervention consultants', asking them for intervention ideas. For example, a speech/language pathologist may be asked to attend for a student who has difficulty acquiring language concepts.

Step 7: Method of monitoring progress: *5 minutes*

Goals
- Each goal must have a method of monitoring progress

Sample Questions:
- *Does the monitoring information really measure the teacher's referral concern(s)?*
- *Who will collect the monitoring information?*
- *How frequently should the data be collected?*
- *Is the method used for collecting information sensitive to growth over a short period of time?*
- *Is there a logical method of tracking progress within the intervention itself (e.g., permanent samples of student's work that are directly tied to the goal.)?*

The S-BIT Team is ready to move on to the next step when:
- Each goal has a method of monitoring progress that is quantifiable

Tip:
- At times S-BIT teams may wish to use already existing teacher measures and/or intervention materials to monitor weekly growth.

Step 8: Plan how to share meeting information with the student's parent(s): *5 minutes*

Goals:
- Agree on who will contact the parent(s) to share the student's intervention plan and invite the parent(s) to a future S-BIT meeting.

Sample Questions:
- *What specific details about the intervention would be of greatest interest to the parent(s)?*

The S-BIT Team is ready to move on to the next step when:
- At least one team member (who could be the referring teacher) has taken responsibility to contact the parent to share information about the student's intervention plan and future
- S-BIT meeting times and dates.

Tip:
- ✓ A phone call or note to the parent(s) prior to the initial S-BIT meeting to let them know about the teacher referral is an important way to establish a trusting and positive relationship between school and home.

Step 9: Review the intervention & monitoring plans:
5 minutes

Goals:

- Review the main points of the intervention and monitoring plans with the referring teacher and other team members.
- (Case Liaison) Schedule a time within a week of the initial meeting to meet with the referring teacher to:
  o review the intervention plan;
  o offer any needed assistance;
  o ensure that the intervention is being put into place as planned.
- Schedule a follow-up meeting (usually within 8-12 weeks of the initial S-BIT meeting).
- After the referring teacher leaves the meeting, complete the *S-BIT Team Meeting Debriefing Form* and debrief as a team about the meeting process and content.

Sample Questions:

- *Do the referring teacher and other members of our team know what their responsibilities are in carrying out the intervention and monitoring plans for this student?*
- *Is our team able to support the teacher in identifying the most important referral concerns?*
- *Did our team help the teacher to assemble a good intervention plan that is feasible and can be carried out with currently available resources?*

Section IV: S-BIT Initial Meeting Minutes Form

Purpose & Guidelines for Use:

At the initial S-BIT meeting, the recorder writes down the essential information on the S-BIT Initial Meeting Minutes Form. The completed form is considered a key part of the student's S-BIT documentation and must be included in the student's S-BIT folder. A copy or a summary of the initial meeting minutes should be made available to parents and/or to other educators who may work with the student.

Initial Meeting Minutes Form

School:

Student:	Grade:	Room:
Today's Date:	Start Time:	End Time:
Meeting Location:	Student ID:	DOB:

Team Roles:	
Referring Teacher:	Facilitator:
Time-Keeper:	Case Liaison:
Recorder:	Others Attending:

Student's Current Attendance Record: (year to date)

Days Absent: **Tardy:**

Case Notes (Optional)

S-BIT Introductory script: *Share with referring teacher at the start of the Initial Meeting*

"Welcome to this initial School-Based Intervention Team meeting. We are meeting with you today to discuss concerns that you have about a student,

The purpose of this meeting is for us all to work together to come up with practical ideas to help this student to be more successful in school. I am the facilitator for today's meeting.

The person taking notes during the meeting will be

The case liaison for this student is

The time-keeper for the meeting is

You can expect this meeting to last about <u>45-60</u> minutes. By the time you leave, we should have a complete student intervention plan put together to help address your concerns.

Our team and you have a lot to do today and only limited time in which to do it. To help us to work efficiently and not waste your time, we will follow a structured problem-solving model that goes through several stages. Together, our team and you will:

- Assess your major concerns about the student
- Help you to pick the one or two most important student concerns for us to work on today
- Set specific student goals for improvement
- Design an intervention plan with strategies to help that student improve, and
- Decide how to share information about this plan with the student's parent

As the student's teacher, you are the most important participant in this meeting. Please let us know at any time if you disagree with, or have questions about, our suggestions. This meeting will not be a success unless *you* feel that the intervention ideas that we offer will address the student's difficulties and are feasible for you to do.

Our meeting notes will document the student's referral concerns and the intervention plan that we come up with. These notes may be shared with others who are not here today, including child's parent(s) and the building administrator. However, we ask that everyone here keep the *conversations* that take place at this meeting confidential.

Do you have any questions?"

Step 1: Assess Teacher Concerns   *5 minutes*

The case liaison and/or facilitator reviews information from the S-BIT Referral Sheet,
including teacher concerns. *(Optional) Additional Teacher/Staff Concerns/Information:*

Step 2: Inventory Student Strengths, Talents & Reinforcers   *5 minutes*

List student strengths, talents, and/or positive incentives that the student finds motivating.
Hint: Strengths, talents, and motivating rewards can be good sources of ideas for intervention planning.

1.

2.

3.

Step 3: Review Baseline Data   *5 minutes*

The case liaison and/or facilitator reviews information from the S-BIT Referral Sheet, including
the S-BIT Data Packet *(i.e. Baseline Data, Teacher Behavior Report Cards, Cum Folder Review)*

Step 4: Select Target Teacher Concerns   *5 – 10 minutes*
Define the top 1 – 2 concerns in **observable terms**

(top **1 – 2** difficulties that most interfere with the student's functioning in the classroom):
<u>Hint</u>: Behavior problems should include relevant information about *frequency*, *duration*, and/or *intensity* of behavior.
(e.g., using data from Teacher Behavior Report Cards, direct observations).
Academic problems should have data regarding student *fluency* and *accuracy* in the area of concern.
(e.g., curriculum-based assessment), as well as information about *work completion.*

1.	**Reasons / Functions for Behavior**	
	Behavioral	**Academic**
	☐ Lacks necessary skills	☐ Lacks necessary skills
	☐ Has limited motivation	☐ Has limited motivation
	☐ Seeks att'n from adults	☐ Struggling academically in current instructional placement
	☐ Seeks att'n from peers	☐ Needs drill & practice
	☐ Reacting to teasing/bullying	☐ Other:
	☐ Tries to escape from work demands or setting	
	☐ Seeks access to privileges, rewards	
	☐ Seeks sensory stimulation (e.g., playing with objects)	
	☐ Other:	

2.	**Reasons / Functions for Behavior**	
	Behavioral	**Academic**
	☐ Lacks necessary skills	☐ Lacks necessary skills
	☐ Has limited motivation	☐ Has limited motivation
	☐ Seeks att'n from adults	☐ Struggling academically in current instructional placement
	☐ Seeks att'n from peers	☐ Needs drill & practice
	☐ Reacting to teasing/bullying	☐ Other:
	☐ Tries to escape from work demands or setting	
	☐ Seeks access to privileges, rewards	
	☐ Seeks sensory stimulation (e.g., playing with objects)	
	☐ Other:	

Step 5a: Set ACADEMIC Goals:
Set observable, measurable and realistic goals for change.

5 - 10 minutes
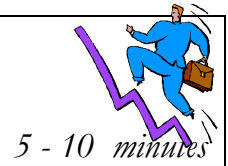
DIBELS *Pre-literacy*	**BASELINE**	**GOAL**
ISF *(initial sound fluency)*		
LNF *(letter naming fluency)*		
PSF *(phoneme segmentation fluency)*		
NWF *(nonsense word fluency)*		
NWF-WCPM *(nonsense words read correct per minute – blending)*		

Dolch Word Lists *(Words correct out of total number of words)*	**BASELINE**	**GOAL**
	/	/
	/	/

ORF: Oral Reading Fluency *(Correct words per minute)*	**Grade**	**BASELINE**	**GOAL**
Instructional			
Frustrational			

MAZE *(correct word replacements assessed at student's **ORF Mastery** level)* **Grade**		**BASELINE**	**GOAL**

Mathematics Curriculum-Based Assessment *(Correct digits per minute)*	**BASELINE**	**GOAL**

Writing Curriculum-Based Assessment *(Timed compositions of 3 minutes)*

☐ **number of correctly spelled words**   ☐ **number of words written**
☐ **number of correct word sequences**   ☐ **other**

Skill	**BASELINE**	**GOAL**

Other Data Collected: *The student attained the following ratings:*	**BASELINE**	**GOAL**

Step 5b: Set BEHAVIORAL Goals:
Set observable, measurable and realistic goals for change.

5 - 10 minutes

Teacher Behavior Report Card: *(note frequencies, percentages or point ratings)*

BEHAVIOR	BASELINE	GOAL

Direct Behavioral Observation: *(note % of intervals or times per day)*

BEHAVIOR	BASELINE	GOAL

BOSS Behavior Category: (%)

	BASELINE	GOAL
AET:		
PET:		
OFT-M:		
OFT-V:		
OFT-P:		
TOTAL ON TASK:		
TOTAL OFF TASK:		

Other Data Collected: *(ie: teacher report, student report, combination)*

	BASELINE	GOAL

Office referrals to date:	ISS:	OSS:	Bus Ref:

Step 6a: Planning/Brainstorming Notes

Please use this page to record all intervention ideas discussed during the meeting.
These ideas may be revisited if the selected interventions prove unsuccessful.

This page courtesy of East Syracuse-Minoa (NY) School District.

Step 6b: Design an Intervention Plan: *15 - 20 minutes*
Describe the intervention and any resources necessary for its implementation.

Concern(s) 1:

Note: With treatment integrity in mind, **be specific and provide as much detail as possible.**

- **When will the intervention start?** ____/_____/20____
- **When and where will the intervention take place?** (Please specify days, times and locations.)

- **Who will be responsible for carrying out this intervention plan?**

- **What (if any) special instructional or behavioral program materials/resources or training is needed for this intervention?** (Please specify)

- **At what date and time will the case liaison check in with the teacher about the intervention?**

- **Intervention Integrity: Select Intervention Monitoring Form. Indicate choice below:**
  * Required for eSchool Documentation - will be collected monthly *
  ☐ *S-BIT Calendar*   ☐ *S-BIT Log #1*   ☐ *S-BIT Log #2*

Person(s) responsible for completing form:

How acceptable is the intervention to the classroom teacher ?
Low   ☐ 1   ☐ 2   ☐ 3   ☐ 4   ☐ 5   *High*

Concern(s) 2:

Note: With treatment integrity in mind, **be specific and provide as much detail as possible.**

- **When will the intervention start?** ____/____/20____
- **When and where will the intervention take place?** (Please specify days, times and locations.)

- **Who will be responsible for carrying out this intervention plan?**

- **What (if any) special instructional or behavioral program materials/resources or training is needed for this intervention?** (Please specify)

- ♦ **At what date and time will the case liaison check in with the teacher about the intervention?**

- **Intervention Integrity: Select Intervention Monitoring Form. Indicate choice below:**
  * Required for eSchool Documentation - will be collected monthly *
  ☐ *S-BIT Calendar* ☐ *S-BIT Log #1* ☐ *S-BIT Log #2*

Person(s) responsible for completing form:

How acceptable is the intervention to the classroom teacher ?
Low   ☐ 1   ☐ 2   ☐ 3   ☐ 4   ☐ 5   *High*

Step 7: Method of Monitoring Progress   *5 minutes*

Attempt to use the same method of collecting progress monitoring data as was used for baseline data collection (see Step 5)

Who will monitor?

Frequency of monitoring:

Method of measuring response to intervention, please check **only** those that are addressed in intervention.

DIBELS *(Pre-literacy)*	**Oral Reading Fluency**	**DOLCH WORD LIST** *Grade Level*	☐ **MAZE** Level: _____
☐ ISF	☐ *Grade Level* _____ *(instructional)*	**Level:** _____	☐ **CBA Writing** Skill:
☐ LNF			
☐ PSF			
☐ NWF	☐ *Grade Level* _____ *(frustrational)*	**Level:** _____	☐ **Other**
☐ NWF-WCPM			

☐ **CBA Math-Identify Targeted Skill(s):**

1.

2.

☐ **Direct Behavior Observation** ☐ **TBRC** ☐ **BOSS** ☐ **Other:** **(specify)**

Step 8: Plan how to share meeting information with the student's parent/guardian(s)   *5 minutes*

•   Who will share the meeting information with the student's parent/guardian(s)?

•   Summary sheet of meeting minutes will be mailed to parent/guardian(s).

Step 9: Review the intervention & monitoring plans   *5 minutes*

•   The recorder reviews the main points of the intervention & monitoring plans with the team.
•   The team selects a meeting date and time for follow-up S-BIT meeting.
•   **Please note: date should be selected 8-12 weeks from start of intervention –** *see step 6 for start date.*
Next meeting date & time: _____
•   The case liaison reviews the agreed-upon time within the next school week to meet with the referring teachers.
•   The team completes the debriefing form.

S-BIT Team Meeting Debriefing Form

Directions: As a Team, rate your group's performance at today's initial S-BIT meeting on the items below. If your group rates any of the items as "No" or "Partly", take a moment to discuss what factors that led to this rating.

		Yes	Partly	No
1.	Does the Team feel that overall it closely followed the 9 steps of the initial meeting format?	1 ☐	2 ☐	3 ☐
2.	Are the meeting minutes filled out completely?	1 ☐	2 ☐	3 ☐
3.	Were all the members given an opportunity to participate?	1 ☐	2 ☐	3 ☐
4.	Was the referring teacher supportive of the intervention plan?	1 ☐	2 ☐	3 ☐
5.	Did the team use the meeting time efficiently?	1 ☐	2 ☐	3 ☐
6.	Was the S-BIT Teaching Assistant's Baseline Data			
	• *reviewed?*	1 ☐	2 ☐	3 ☐
	• *used to make decisions?*	1 ☐	2 ☐	3 ☐
7.	Were the target behavioral and/or academic concern(s) clearly defined in observable terms? *(step 4)*	1 ☐	2 ☐	3 ☐
8.	Were the intervention plans clearly and specifically defined?	1 ☐	2 ☐	3 ☐
9.	Did the team determine how the intervention integrity would be monitored?	1 ☐	2 ☐	3 ☐

(Optional) What are some additional ideas that the group has for helping this particular teacher to successfully carry out the intervention plan?

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Initial Meeting Summary

School:

Student:	Grade:
Referring Teacher:	Today's Date:
Case Liaison:	Follow-up Meeting:
Person Contacting Parent/Guardian:	

Concern #1:

Intervention:

Type of Monitoring Needed:

Baseline:	**Goal:**
Baseline:	**Goal:**
Baseline:	**Goal:**
Baseline:	**Goal:**

Materials / Support and Responsible person (s):

NOTES:

Initial Meeting Summary pg.2

Concern #2:

Intervention:

Type of Monitoring Needed:	
Baseline:	**Goal:**
Baseline:	**Goal:**
Baseline:	**Goal:**
Baseline:	**Goal:**

Materials / Support and Responsible person (s):
NOTES:

Section V: S-BIT Express Follow-Up Meeting Minutes Form

Purpose & Guidelines for Use:

These minutes forms are to be used at the Follow-Up S-BIT meeting. They contain sections to evaluate the effectiveness of the interventions used and to document the next steps that the Team will take in response to this outcome data.

Follow-Up Meeting Minutes

School:

Student:		Grade:	Room:
Today's Date:	Initial Meet Date:	Start Time:	End Time:
Meeting Location:		Student ID:	DOB:

Team Roles:	
Referring Teacher:	Facilitator:
Time-Keeper:	Case Liaison:
Recorder:	Others Attending:

Step 1: Debrief About Intervention "Follow-Through"   *5 - 10 minutes*

Through discussion with the teacher and team, evaluate how close the
actual intervention was carried out when compared to the original design.

REVIEW THE INTERVENTION PLAN: *Include steps of plan and person(s) responsible.* ☐
Start date of the intervention:
Did the case liaison check in with you about this intervention after the last meeting? ☐ Y ☐ N
Were there difficulties that substantially interfered with carrying out this intervention? ☐ Y ☐ N
If **yes**, please explain:
Intervention Integrity Log submitted monthly: ☐ Y ☐ N **(Required for eSchool Data Input)**
Was the intervention implemented as designed? ☐ Y ☐ N
If **no**, please explain:
Frequency of implementation? (please indicate number of sessions)
Accuracy of implementation?
Comments:

Step 2a: Evaluate Academic Progress

Directions: Write in the *baseline*, *goal* and *outcome* values
for each data-collection method chosen to monitor this student.

Note: To determine Outcome levels, use the median of the last 3 data points collected.   *5 - 10 minutes*

DIBELS *Pre-literacy*

	BASELINE	GOAL	OUTCOME	New GOAL
ISF *(initial sound fluency)*				
LNF *(letter naming fluency)*				
PSF *(phoneme segmentation fluency)*				
NWF *(nonsense word fluency)*				
NWF-WCPM *(NWF word correct per minute - blending)*				

Dolch Word Lists *(Words correct out of total number of words)*

	BASELINE	GOAL	OUTCOME	New GOAL
	/	/	/	/
	/	/	/	/

ORF Oral Reading Fluency *(Correct words per minute)*

	Grade	BASELINE	GOAL	OUTCOME	New GOAL
Instructional					
Frustrational					

MAZE

*(Correct word replacements assessed at student's **ORF MASTERY** level)*

	Grade	BASELINE	GOAL	OUTCOME	New GOAL

Mathematics Curriculum-Based Assessment *(Correct digits per minute)*

	BASELINE	GOAL	OUTCOME	New GOAL

Writing Curriculum-Based Assessment *(Timed compositions of 3 minutes)*

☐ **number of correctly spelled words**   ☐ **number of words written**
☐ **number of correct word sequences**   ☐ **other**

Skill	BASELINE	GOAL	OUTCOME	New GOAL

Other Data Collected *The student attained the following ratings:*

	BASELINE	GOAL	OUTCOME	New GOAL

Step 2b: Evaluate Behavioral Progress

Directions: For each data-collection method chosen to monitor
this student, write in the *baseline*, *goal* and *outcome* values.

5 – 10 minutes

Teacher Behavior Report Card *(note frequencies, percentages or point ratings)*

BEHAVIOR	BASELINE	GOAL	OUTCOME	New GOAL

Direct Behavioral Observation *(note % of intervals or times per day)*

BEHAVIOR	BASELINE	GOAL	OUTCOME	New GOAL

BOSS Behavior Category (%)

	BASELINE	GOAL	OUTCOME	New GOAL
AET:				
PET:				
OFT-M:				
OFT-V:				
OFT-P:				
TOTAL ON TASK:				
TOTAL OFF TASK:				

Other data collected:

(ie: direct observation, teacher report, student report, combination)

	BASELINE	GOAL	OUTCOME	New GOAL

Office referrals to date:	ISS:	OSS:	Bus Ref:

Step 3: Evaluate Plan Effectiveness   *5 – 10 minutes*

Look at the data in Step 2. For each goal, use the data to decide how successful the student was in meeting the behavioral/academic goal(s) of the intervention plan:

Student's outcome data…

- *Met* or *exceeded* **the S-BIT goal:**

      ☐ **Concern 1**
      ☐ **Concern 2**

- *Showed promising progress* **but did not meet the S-BIT goal**
         (*the outcome fell between baseline and goal*)

      ☐ **Concern 1**
      ☐ **Concern 2**

- *Showed only minor progress*
         (the outcome did not differ significantly from baseline)

      ☐ **Concern 1**
      ☐ **Concern 2**

- *Showed no progress or showed regression*
      (the outcome did not differ from baseline or was lower than baseline at conclusion of intervention period)

      ☐ **Concern 1**
      ☐ **Concern 2**

Next step…

☐ *Select a new behavior and/or academic goal and create a new intervention to meet that new goal.*
         (or raise the current goal).

☐ *Create a plan to discontinue the present intervention* because all goals have been achieved. Discuss strategies to help the student to generalize gains to other activities or settings. Decide how to 'fade' (gradually reduce) the intervention while maintaining student gains.

☐ *Continue with the present intervention without changes.*
         Schedule a follow-up meeting later in the year to ensure that the student continues to make gains.

☐ *Continue with the present intervention with minor changes.*
         Schedule another follow-up meeting within several weeks.

☐ *Substantially revise or replace the present intervention.* Schedule another follow-up meeting in several weeks.
         (Continue through the steps of this intervention-planning form to revise the intervention.)

☐ *Forward S-BIT packet to Pupil Services Team (PST) for review. Packets to include: Initial and Follow-Up meeting summary forms, outcome data/graphs, intervention integrity forms.*

Step 4: Design an Intervention Plan   *15 - 20 minutes*

Describe the intervention and any resources necessary for its implementation.

Concern(s) 1:

Note: With treatment integrity in mind, **be specific and provide as much detail as possible.**

- **When will the intervention start?** ____ / ____ /20 ____
- **When and where will the intervention take place?** (Please specify days, times and locations.)

- **Who will be responsible for carrying out this intervention plan?**

- **What (if any) special instructional or behavioral program materials/resources or training is needed for this intervention?** (Please specify)

- **At what date and time will the case liaison check in with the teacher about the intervention?**

- **Intervention Integrity: Select Intervention Monitoring Form. Indicate choice below:**
  * Required for eSchool Documentation - will be collected monthly *
  ☐ *S-BIT Calendar* ☐ *S-BIT Log #1* ☐ *S-BIT Log #2*

Person(s) responsible for completing form:

How acceptable is the intervention to the classroom teacher?
Low ☐ 1   ☐ 2   ☐ 3   ☐ 4   ☐ 5   *High*

Concern(s) 2:

Note: With treatment integrity in mind, **be specific and provide as much detail as possible.**

- **When will the intervention start? ____/_____/20____**
- **When and where will the intervention take place?** (Please specify days, times and locations.)

- **Who will be responsible for carrying out this intervention plan?**

- **What (if any) special instructional or behavioral program materials/resources or training is needed for this intervention?** (Please specify)

- **At what date and time will the case liaison check in with the teacher about the intervention?**

- **Intervention Integrity: Select Intervention Monitoring Form. Indicate choice below:**
  * Required for eSchool Documentation - will be collected monthly *
  ☐ *S-BIT Calendar* ☐ *S-BIT Log #1* ☐ *S-BIT Log #2*

Person(s) responsible for completing form:

How acceptable is the intervention to the classroom teacher?
Low   ☐ **1**   ☐ **2**   ☐ **3**   ☐ **4**   ☐ **5**   *High*

Step 5: Review the intervention & monitoring plans   *5 minutes*

At the close of the meeting, follow any of these steps as needed:

o The recorder reviews the main points of the intervention & monitoring plans with the team.
o A person is selected to share meeting information with the student's parent(s):
   Parent contact person:

o A summary of the meeting will be sent to the parent(s)
o The team selects a meeting date and time for the next follow-up S-BIT meeting:
o **Please note: Date should be selected 4-8 weeks from today.**
   Next meeting date & time:

Outcome of meeting:	Continue to monitor? ☐ Y ☐ N	☐ S-BIT ☐ Other
	☐ **Dismiss S-BIT case**	☐ **Forward to PST/CSE**
	☐ **Continue interventions**	☐ **Cont. w/Changes:**

Next Step:

S✚BIT
School-Based Intervention Teams

Follow-Up Meeting Summary

School:

Student:	Grade:	Today's Date:
Referring Teacher:		Initial Meeting:
Case Liaison:		Next Follow-Up Meeting:
Person Contacting Parent/Guardian:		

Concern #1:

Baseline:	Goal:	Outcome:	New Goal:
Baseline:	Goal:	Outcome:	New Goal:
Baseline:	Goal:	Outcome:	New Goal:
Baseline:	Goal:	Outcome:	New Goal:

☐ **Met or exceeded goal**   ☐ **Showed minor progress**

☐ **Showed promising progress**   ☐ **Showed no progress**

Outcome of meeting:	Continue to monitor? ☐ Y ☐ N	☐ **S-BIT** ☐ **Other**
	☐ **Dismiss SBIT case**	☐ **Forward to PST/CSE**
	☐ **Continue interventions**	☐ **Cont. w/Changes:**

New Intervention:

Follow-Up Meeting Summary pg. 2

Concern #2:

Baseline:	Goal:	Outcome:	New Goal:
Baseline:	Goal:	Outcome:	New Goal:
Baseline:	Goal:	Outcome:	New Goal:
Baseline:	Goal:	Outcome:	New Goal:

☐ **Met or exceeded goal**   ☐ **Showed minor progress**

☐ **Showed promising progress**   ☐ **Showed no progress**

Outcome of meeting:	Continue to monitor? ☐ Y ☐ N	☐ **S-BIT** ☐ **Other**
	☐ **Dismiss SBIT case**	☐ **Forward to PST/CSE**
	☐ **Continue interventions**	☐ **Cont. w/Changes:**

New Intervention:

Section VI: S-BIT Introductory Staff Survey and Referring Teacher Acceptability Questionnaire

Purpose & Guidelines for Use:

S-BIT Introductory Staff Survey: When a school is considering adopting the S-BIT Team model, we recommend that presenters provide staff with an overview of the problem-solving process. Then the presenters should hand out the S-BIT Introductory Staff Survey and request that staff complete the anonymous questionnaire. The collated results will give buildings a very good idea of the level of staff support for the process and also help to identify staff members who—because they were nominated by a number of their colleagues—would be good candidates to serve as S-BIT Team members.

 S-BIT Teacher Acceptability Questionnaire: After a referring teacher has participated in an S-BIT meeting and had sufficient time to try out the intervention, he or she receives a copy of this questionnaire to complete anonymously. The survey provides building S-BIT Teams with invaluable information about how inviting teachers find S-BIT meetings to be, how helpful they believed the Team to be, and how well referring teachers felt that they could actually carry out the intervention plans.

School Based Intervention Team Introductory Presentation: Staff Survey

We value your input about this school's adopting the S-BIT Teacher Team model. Please complete this brief, anonymous question and return it to the S-BIT presenters:

1. What is your position in the school?
   - ❑ General-Education Teacher
   - ❑ Special Education Teacher
   - ❑ Support Staff (e.g., School Nurse, School Psychologist, School Counselor, etc.)
   - ❑ Teaching Assistant/Paraprofessional
   - ❑ Other (Please specify): _____

2. Based on what you now know about the S-BIT Process after this presentation…

   How much do you believe that your school would *benefit* from having an S-BIT Team?

1	**2**	**3**	**4**
No benefit	Little benefit	Some benefit	A lot of benefit

   How *likely* do you think it is that your school can organize an effective S-BIT Team?

1	**2**	**3**	**4**
Not at all likely	Moderately likely	Likely	Very Likely

3. What are some major roadblocks that you believe might need to be addressed in this school in order for S-BIT to be successful? What are some creative solutions that you think could address these concerns?

   _____

   _____

   _____

4. If you could nominate any 3 people in your building to serve on the S-BIT Team, whom might you select? (Please include your own name if you would be interested in serving on this team!):

   a. _____

   b. _____

   c. _____

School-Based Intervention Team Teacher Acceptability Questionnaire

We are contacting you because you referred a child to your building's School-Based Intervention Team this year. As a teacher, your feedback is very important in helping us to assess how effective the S-BIT Team has been at your school. Please take a few minutes to complete the items below. The questionnaire is anonymous. Your responses and comments will be compiled and shared with your building's S-BIT Team, but you will not be identified. Thank you in advance for helping us to evaluate the S-BIT program!

1a.   How would you rate the severity of the student's target problem(s) prior to your referring the child to S-BIT?

Not at all severe   1   2   3   4   5   6   Very severe

1b.   How would you rate the severity of the student's target problem(s) now (after referring the child to S-BIT)?

Not at all severe   **1   2   3   4   5   6**   Very severe

Regarding the interventions used, please circle the number which best describes your agreement/disagreement with each statement, using the following scale:

1=strongly disagree   2=disagree   3=slightly disagree   4=slightly agree   5=agree   6=strongly agree

2.   I liked the procedures used in this intervention.   **1 2 3 4 5 6**
3.   This intervention was a good way to handle the problem.   **1 2 3 4 5 6**
4.   Overall, this intervention was beneficial for the child.   **1 2 3 4 5 6**
5.   I had the resources (time/materials) needed to implement   **1 2 3 4 5 6** this intervention.
6.   To what extent were you and/or others able to implement the S-BIT intervention as designed?

Never/Didn't use   **1   2   3   4   5   6**   Every day/Exactly
the intervention   as planned

7.   Do you feel that you have gained intervention ideas or knowledge through your involvement with the S-BIT Team that you will be able to use with other students?

Definitely NO   **1   2   3   4   5   6**   Definitely YES

8.   In general, how helpful was the S-BIT Team in helping you to achieve a positive outcome for the student?

Not at all helpful   **1   2   3   4   5   6**   Very helpful

9. What were the most helpful aspects of the S-BIT process for you?

_____

_____

_____

_____

10. In your opinion, what areas could the S-BIT Team improve to make it a better or more useful experience for referring teachers?

_____

_____

_____