

The School Board of St. Lucie County  
**Documentation of Response to Instruction/Intervention**

Grade Level	<input type="checkbox"/> Academic <input type="checkbox"/> Behavior	Targeted Category:	<input type="checkbox"/> Tier II – Targeted Instruction/Intervention <input type="checkbox"/> Tier III – Intensive Instruction/Intervention	Today's Date:	
School: <span style="float: right; color: #0070C0; font-weight: bold;">Attach Meeting Summary Notes</span>					
INDIVIDUAL STUDENT RESULTS					
RESPONSE TO INTERVENTION: Is it working? Refer to the <b>Intervention Documentation Worksheet</b> when answering questions below. <span style="color: #0070C0; font-weight: bold;">Attach worksheets and graphs.</span>					
Instrument Used:					
Expected Level of Performance: _____					
Student/ID#	Consistent Attendance?	Consistent Delivery?	Current Level of Performance	Student Response	Exit Continue Modify New
_____	Y / N	Y / N	_____	Poor Questionable Positive	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Y / N	Y / N	_____	Poor Questionable Positive	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Y / N	Y / N	_____	Poor Questionable Positive	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Y / N	Y / N	_____	Poor Questionable Positive	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Y / N	Y / N	_____	Poor Questionable Positive	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Y / N	Y / N	_____	Poor Questionable Positive	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Y / N	Y / N	_____	Poor Questionable Positive	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Y / N	Y / N	_____	Poor Questionable Positive	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Y / N	Y / N	_____	Poor Questionable Positive	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
DECISION MAKING GUIDE					
YES/YES POSITIVE Continue Intervention As Is Successfully Exit	YES/YES/QUESTIONABLE or POOR Modify Intervention Implement New Intervention		NO/NO/QUESTIONABLE or POOR YES/NO/QUESTIONABLE or POOR NO/YES/QUESTIONABLE or POOR Continue intervention and incorporate strategies to improve intervention integrity.		
GROUP RESULTS					
What percentage of the students in the targeted skill group showed positive response? _____  70-80% = Option 1 = Change or modify intervention for unsuccessful students (preferred 1 <sup>st</sup> time choice) Option 2 = Consider Tier III services for students with poor Student Outcomes BUT positive Treatment Integrity. <70-80% = Go back to Problem Solving Worksheet to determine another Tier II group intervention.					