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Educators' perceptions of the process and implementation of a multi-tiered system of supports (MTSS): A case study

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Educators' Perceptions of the Process and Implementation of a Multi-Tiered System of Supports
(MTSS): A Case Study

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Abstract

This study serves as an investigation of the current perceptions held by educators within the North Carolina Public School System regarding Multi-tiered Systems of Support (MTSS). This paper explores the theories that guide MTSS and what factors differentiate it from other popular educational initiatives that have preceded MTSS. Additionally, this paper discusses the importance of educator buy in when implementing a new educational initiative (such as MTSS), psychological theories that guide systems change, North Carolina's statewide MTSS initiative, and current practices at Shiloh Elementary in Union County, North Carolina. The current study is proposed as a means of gaining insight into the current perceptions about MTSS held by educators at Shiloh Elementary. In this study, general education teachers at Shiloh Elementary in Union County, North Carolina were asked to complete a survey to share their perceptions about the implementation of MTSS within their school. Select teachers also participated in discussion groups to discuss their thoughts on MTSS with colleagues to determine what, if any, factors help or hinder the implementation of MTSS.

Keywords: Multi-tiered Systems of Support, MTSS, North Carolina, Educators' Perceptions

Introduction

One of the most salient challenges that school personnel face today is the ever-changing structures and revolving-door of educational initiatives. Education as a whole has been described by some as continuously changing in pursuit of improvement (Latham, 1988). Year after year, new initiatives are proposed to administrators, educators, aids, and students alike, and year after year schools see turnover in educational initiatives, despite the impact (or lack thereof) these initiatives have on student outcomes (McIntosh & Goodman, 2016). This process has been deemed as the “birth and death [cycle] of educational innovations” (Latham, 1988, p.18), and some speculate that it is due to the surface-level nature of the change that these initiatives propose (Coburn, 2003). Thus, as one of the most recent educational initiatives to hit the scene prepares to roll out state-wide in North Carolina following the 2019-2020 academic school year, many educators may find themselves wondering how long the Multi-tiered Systems of Support framework will be implemented in their buildings.

Although the concept of Multi-tiered Systems of Support (MTSS) is steadily gaining recognition in the educational community, there is question about how this new educational reform initiative will set itself apart from other similar ideas that have been proposed in the past. There is also concern that MTSS has already been tried, as some believe that MTSS is synonymous with Response to Intervention (RtI). While these concerns are understandable, MTSS has a much more positive outlook than its predecessors, in that rather than rolling out an entirely new idea or framework in schools to support students in one area, MTSS utilizes existing resources in a way to make them more accessible and effective for all students. Although the acronym “MTSS” is relatively new, it is not a new idea entirely, but rather a combination of past educational reform initiatives. McIntosh and Goodman (2016) describe MTSS as “an approach

that can help to connect existing efforts and systems across domains and integrate the support that is already provided to students into a seamless whole” (p. 4). Thus, although MTSS may seem like an entirely new initiative altogether, it is simply a way to pool existing resources in a way that makes sense. The obstacle now, is to educate and prepare school personnel in a way that leaves them confident to implement MTSS in their buildings to effect systemic change; to do this, educator “buy in” is needed.

Review of the Literature

Core Components of MTSS and RtI

Tiered levels of support for students is among the components that Response to Intervention (RtI) and Multi-tiered Systems of Support (MTSS) have in common. The multi-tiered model is designed to act as a preventative measure to identify students’ needs and provide appropriate intervention prior to failure (Chard & Linan-Thompson, 2008). Students are provided with a continuum of supports that coincide with their individual needs and areas of deficit (Manglia 2017). Supports offered within each level become more intense and individualized as students move up tiers; diagnostic assessment of students’ areas of deficit help to identify the level of intensity necessary for each student to better inform specific interventions (Fuchs & Fuchs, 2006; McIntosh & Goodman, 2016). Students move between tiers based on their responsiveness to targeted interventions, as measured by progress monitoring within the multi-tiered levels of support.

Tier one is most often employed as a universal intervention to identify at-risk students who may benefit from increased levels of support and to rule out inadequate instruction as an explanation for poor academic performance (Merrell, Ervin, & Gimpel Peacock, 2012; Daly, Martens, Barnett, Witt, & Olsen, 2007). Tier one interventions are often used to identify

academic problems within the general student population (Manglia, 2017). While these universal interventions can be delivered class-wide, school-wide, district-wide, state-wide, etc. to target the academic development of students (Gresham, 2004), they are usually implemented via research-based instruction that is delivered in general education classrooms (Bradley, Danielson, & Dolittle, 2007). Instruction that rises to the level necessary to be considered a tier one intervention prepares students to be successful in reaching benchmark expectations (Reschly, 2014). Thus, high quality instruction of a core curriculum should be accessible to all students (Manglia, 2017), and if 80% or less of the student population is unable to meet benchmark standards via access to the general education curriculum, the issue is not student-based, but rather an issue within the curriculum and/or instruction (McCook, 2006).

The aforementioned response rate of 80% of students stems from the idea that the overwhelming majority of students respond to interventions implemented at the universal level of instruction (McCook, 2006), thus satisfying their academic needs in tier one. The remaining students whose needs were unmet by tier one therefore progress to tier two. As mentioned previously, students should be able to fluidly move from tier to tier as needed; their need is determined by their responsiveness to each level of intervention; students' responsiveness to intervention is determined through progress monitoring (Manglia, 2017). If students' performance falls behind that of their peers in both grade level and rate of improvement, tier two services should commence (Stecker, Fuchs, & Fuchs, 2008).

Tier two interventions are contingent upon the results of tier one, in that interventions are chosen based on data collected via universal screening. These interventions are more involved and intentionally target areas of deficit for the 5-10% (Sugai, Horner, & Gresham, 2002 as cited by Gresham 2002) of students who did not respond to tier one interventions. Thus, instead of

targeting the needs of all students, tier two supports focus specifically on meeting the needs of at-risk students, who were identified via universal screening/tier one interventions (Manglia, 2017).

If a student is unsuccessful or fails to make progress while receiving tier two supports, they are moved upwards to tier three in an attempt to better meet their needs. Tier three supports are the most intensive supports available to students, and sometimes fall under the umbrella of Special Education/Exceptional Children's programming. Nevertheless, tier three supports are almost always implemented by a specialist (school psychologist, school counselor, reading specialist, speech-language pathologist, etc.), rather than the classroom teacher or interventionist as is the case with tier one and tier two supports (Manglia, 2017). Tier three supports are intensive and individualized to target needs of each specific student who has failed to respond to less intensive and more general interventions.

The effectiveness of the aforementioned tiered levels of support is made possible through diagnostic assessment and progress monitoring that takes place throughout the process. Diagnostic assessment occurs once students who need more intensive supports have been identified through universal screening. These measures should be implemented prior to intervention selection as diagnostic assessment supplies additional information about students' current level of functioning and identifies specific areas of deficit (McIntosh & Goodman, 2016). Functional Behavior Assessments and Functional Academic Assessments are common examples of diagnostic assessments, as they provide more information, such as the functions of unwanted behaviors or the identification of specific academic problems that help to identify specific underlying skill deficits (McIntosh & Goodman, 2016). Having a clear picture of students'

current levels of functioning is necessary when choosing an evidence-based intervention to implement at the tier two and tier three levels of support.

After diagnostic assessment has informed interventions to be employed at tier two and tier three, progress monitoring evaluates the effectiveness of the chosen interventions (McIntosh & Goodman, 2016). While progress monitoring tools are often similar to screening measures, such as benchmark data collection, they differ in their desired frequency. Progress monitoring should occur more frequently, especially for students receiving tier two and tier three services, as it is pertinent to know an intervention's effectiveness sooner than later so that other opportunities to intervene are not lost (Archer & Hughes, 2011). Ideally progress monitoring should occur continuously and on an individual basis. Progress monitoring that is completed by a teacher or other school professional that interacts with the student on a daily basis is believed to be more effective than when completed by an outside professional who does not regularly serve the student (McIntosh & Goodman, 2016). Classroom progress monitoring could be measured via daily report cards or behavior ratings, completed by teachers while students engage in individual or small group work (McIntosh & Goodman, 2016). North Carolina's Policies Governing Services for Children with Disabilities Addendum describes progress monitoring as "data-based documentation of repeated assessments that produce quantitative results that are charted over time to document rates of improvement" (Policies Governing Services for Children with Disabilities Addendum, 2016, p.3). To ensure that progress monitoring is data-driven and quantitative in nature, measures utilized to progress monitor should be "brief, reliable, valid, sensitive, linked to the area of intervention/instruction, and measure the same construct/skill over time" (Policies Governing Services for Children with Disabilities Addendum, 2016, p. 3).

Continuous progress monitoring informs intervention effectiveness as determined by whether or not the students are making sufficient growth within their respective tiers, thus determining whether or not current supports are appropriately matching students' needs. If a student is failing to make adequate progress, perhaps the intervention/current supports should be adjusted to better meet the student's needs (within their current tier). If a student continues to make inconsistent/inadequate progress despite receiving targeted interventions, perhaps it is appropriate to increase their level of support, thus moving them up within the multitiered system. Similarly, if a student is consistently making progress within their current tier, it may be appropriate to decrease their current level of support, thus moving them down a tier (McIntosh & Goodman, 2016). Therefore, information concerning intervention effectiveness obtained through continuous progress monitoring informs the fluidity in which students should move through the multi-tiered levels of support available to them.

Distinguishing between RtI and MTSS

It is a common misconception that the terms RtI and MTSS are synonymous. While RtI and MTSS are closely related, they are not one in the same, as RtI is considered a part of a larger MTSS framework, but the opposite is not true (What's the Difference between RtI and MTSS, 2017). Both RtI and MTSS are problem-solving approaches to intervention that are used within schools (Fuchs & Fuchs, 2006). These problem-solving approaches are multifaceted and guided by the same underlying ideologies of analyzing the problem, responding with an intervention, carrying out the intervention, progress monitoring, modifying the interventions as necessary, and evaluating the effectiveness of the intervention to inform future actions (Grimes, 2002 as cited by Fuchs & Fuchs, 2002).

While both RtI and MTSS share the components of tiered levels of support, diagnostic assessment, progress monitoring, and evidence-based instruction, the scope of which their interventions reach is perhaps the largest distinction between the two. RtI utilizes the aforementioned components to target students who are at risk for academic difficulties (McIntosh & Goodman, 2016). MTSS, on the other hand, encompasses academic, behavioral, social, and emotional supports, thus serving a wider range of students than RtI (What's the Difference between RtI and MTSS, 2017). Thus, as RtI is typically used to identify and support students who are at-risk for Special Education Identification, MTSS offers a larger range of services to a broader audience, therefore making it truly universal.

School Psychologists' Role in Systems Change

A system can be described as an “entity made up of interconnected parts with recognizable relationships that are systemically arranged to serve a perceived need” (Gilligan, 2017). As school buildings are excellent examples of “systems” within this context, before a major change can be evoked (such as implementing a new educational initiative like MTSS), agents of change (such as School Psychologists) must work to understand the makeup of the system, including subsystems and all other moving parts within it prior to effecting change. The “Four C’s of Systems Change” (Gilligan, 2017) is a framework that can assist School Psychologists with a smoother transition that results in long lasting change.

The first “C” within this framework refers to “Context.” Prior to attempting systems change, it is imperative that the School Psychologist understand the intricacies of their school building. This can be accomplished by determining different roles people play, how decisions are reached, the values and goals of the building and how they are communicated, as well as common adaptation and problem solving techniques used within the building (Gilligan, 2017).

After examining and understanding the context in which a school building operates, the School Psychologist should use this information to support their attempt to gain “buy in” from approximately 80% of the individuals within the building before moving forward with change.

The second “C” within this framework refers to “Conceptual Model,” more specifically, to the problem solving process within the school building (Gilligan, 2017). Once identified, it is necessary for the School Psychologist to operate within the conceptual model adopted by their building during the entirety of the systems change process. This may mean analyzing outcomes or changing their approach to systems change in order to ensure that the same conceptual model is utilized across all aspects of the building (Gilligan, 2017).

The third “C” within this framework refers to “Capacity.” It is the School Psychologist’s responsibility to ensure that their building can sustain the change without support from outside resources (Gilligan, 2017). This is achieved by implementing change in such a way that it ultimately becomes embedded within the building’s infrastructure. With the MTSS example specifically, School Psychologists can facilitate refresher courses each semester for school staff or create visual aids to be used by MTSS problem solving teams in their absence.

The fourth and final “C” within this framework refers to “Collaboration.” Collaboration is not only one of the guiding principles in a School Psychologist’s training, it is one of the most integral parts of change. When looking at systems change specifically, it is important for the School Psychologist connect with individuals, groups, and other subsystems in a way that equalizes power between School Psychologist and individuals within their school buildings (Gilligan, 2017). Although the School Psychologist may be considered the “expert” on implementing MTSS within a school building, it is important that they remain open to

compromise and share power with other members of the building, thus fostering a sense of ownership of the change within the system as a whole.

It is likely that operating within the “Four Cs” framework when trying to evoke systems will result in more successful, long lasting systems change. By utilizing the “Four C’s,” the School Psychologist’s proposed change, in this case, MTSS, is more likely to reach the “institutionalization” phase of systems change. The institutionalization phase of systems change occurs when members of a system take ownership of the change, establish leadership roles among themselves, and continuously evaluate the success of the change to inform future professional development opportunities (Kipps-Vaughan, 2016).

School Based Personnel Perceptions

As previously mentioned, “buy in” from school personnel is essential to the success of new educational reform initiatives. And, due to the revolving-door nature of failed initiatives in the past, educators are likely to experience “initiative fatigue” (Greenberg, Weissburg, & O’Brien, 2003), which is described as “the feeling of being overwhelmed by innovation, resistant to new initiatives, and pessimistic about the feasibility of educational change” (McIntosh & Goodman, 2016, p. 1). Initiative fatigue can be extremely detrimental to the success of a new program, such as MTSS, thus making it a salient issue for stakeholders to target and assuage as soon as possible. A plausible way to combat initiative fatigue among teachers is to ask them about their attitudes and perceptions of the new initiative, in this case MTSS. Educators are an integral piece of systems change (Werts, Lambert, & Carpenter, 2009), and it has been argued that in order to effect change within a school, educators’ perceptions must be solicited to maintain a positive school climate (Greenfield, Rinaldi, Proctor, & Caradelli, 2010, as cited by Castro-Villarrel, Rodriguez, & Moore, 2014). Thus, educators should be afforded the opportunity

to voice their opinions about MTSS and have a space to share and work through anticipated successes and failures of MTSS within their schools.

North Carolina's SLD 2020 Initiative

In February 2016, the North Carolina Board of Education approved a policy change regarding the “definition, evaluation, and identification” of students with Specific Learning Disabilities (NC MTSS Implementation Guide: SLD Policy Change Fact Sheet, 2016). While the policy was made effective in February 2016, it does not have to be fully implemented until July 1, 2020, thus giving North Carolina public schools a little over four years to make the necessary changes in order to be in compliance with the policy. This change in policy prohibits the use of the strengths and weaknesses and/or discrepancy models when identifying students with Specific Learning Disabilities.

The previously used strengths and weaknesses model is guided by the assumption that, “if not for the presence of an underlying cognitive deficiency which is affecting acquisition or development of a specific academic skill, an individual would be able to learn and perform that skill satisfactorily” (Flanagan, Ortiz, & Alfonso, 2013, p. 227). In other words, academic skill area deficits should be able to be linked to specific cognitive processing weaknesses (for example, a student’s below average processing speed negatively impacting their reading fluency abilities). The previously mentioned ability-achievement discrepancy model operates on the assumption that a student can only be identified as learning disabled if a 15-point difference in the student’s overall cognitive abilities (often represented by an Intelligence Quotient, or IQ) and academic achievement abilities, as measured by formal assessments is present. In other words, if a student displays average overall cognitive abilities, but performs

below average in an area of academic achievement, a suspected learning disability could be present (for example, a student's overall IQ is 95, but their reading fluency abilities are an 80).

Although both of these aforementioned models have been used for years across the United States, including North Carolina, there are flaws within the strengths and weaknesses and ability-achievement models when identifying students with Specific Learning Disabilities. Common critiques of these models are that they produce a “wait to fail method” because discrepancies are not distinct until students are in upper elementary school (Flanagan et. al, 2013), and that the models are too dependent upon Standard Scores, and do not take into account Standard Deviations; Standard Scores are merely a “snapshot” of how a student performs on the day of the formal assessment, and should not be interpreted as a measure of which they cannot grow upon. Thus, in lieu of the strengths and weaknesses and ability-achievement discrepancy models as means of identifying Specific Learning Disabilities, North Carolina is making the shift to responsiveness to instruction and evidence-based, tiered interventions that are made available through a Multi-tiered System of Supports (MTSS). Members of North Carolina's Board of Education believe that this shift will result in a more consistent process of identifying Specific Learning Disabilities across the state in a more comprehensive way, that provides an opportunity for early intervention versus the “wait to fail” method (NC MTSS Implementation Guide: SLD Policy Change Fact Sheet, 2016).

Current Practices at Shiloh Elementary

In preparation of North Carolina's MTSS state-wide roll out in 2020, Union County Public Schools (UCPS) has provided county resources for employees in an attempt to make the transition to MTSS smoother. One of the resources most frequently used by staff members at Shiloh Elementary is UCPS's “MTSS Flowchart.” This flowchart very intentionally lays out the

expectations of action within each of the three tiers of MTSS. Actions that fall under Tier I include creating and implementing school-based structures (such as MTSS leadership teams, collecting behavioral, attendance, and academic data on each student, and establishing or hiring an MTSS coach and/or interventionist), planning core instruction (including a social-emotional learning curriculum in addition to core academic curriculum), and establishing a standard treatment protocol (identifying available interventions, choosing a progress monitoring tool, training staff members, and deciding on intervention duration as well as data decision points). Actions that fall under Tier II include planning for supplemental instruction and/or intervention (determining which students should proceed to Tier II based on data decision points), progress monitoring 1-2 times per month, and reviewing the student's progress to make a decision (discontinue interventions, continue interventions, modify interventions, or intensify interventions/move to Tier III). Actions that fall under Tier III include inviting the parent to be a part of the MTSS team, create an individual student plan based on the data collected during Tiers I and II, implementing appropriate evidence-based interventions, progress monitoring, and considering all rule out factors based on part of the decision making process.

In addition to the MTSS Flowchart, UCPS has published a "Standard Treatment Protocol" that provides schools with suggested data entry rules, proposed interventions with frequency and group size recommendations, progress monitoring tools, and plans to intensify interventions. Standard Treatment Protocols have been published to support MTSS teams across areas of Literacy, Math, and Behavior.

Per the recommendations of UCPS, Shiloh Elementary has a working MTSS team that meets regularly to review the progress of and make decisions about students within the building. Currently, the MTSS team is comprised of Assistant Principal, School Counselor, and a grade-

level representative. In addition to these members, parents are always invited to participate in meetings once their child has entered into Tier II of the intervention process. Additionally a full-time Literacy Interventionist and School Psychologist are also sometimes included in MTSS meetings.

Shiloh Elementary collects data on all students within the areas of literacy, math, and behavior. Classroom teachers are required to update students' current reading levels and grades into a school-wide spreadsheet. Behavioral incidents are logged by administration. Each month, the MTSS team is scheduled to review student data class by class as a means of progress monitoring to guide decision making. Depending upon students' scores, they are color coded and classified as meeting grade-level expectations (green), nearing expectations (yellow), and below expectations (red). Students who are classified within the red, and are failing to meet grade level expectations are then referred to Tier II of the intervention process. Pending parent permission, students begin to receive targeted interventions either within a small group (lead by a teacher or teacher's assistant) within their classroom, or by the Literacy Interventionist. The MTSS team meets approximately six weeks after Tier II interventions begin to review the students' progress. Per UCPS guidelines, based on the data collected by the classroom teacher and/or Literacy Interventionist, one of the following decisions is made: discontinue interventions, continue interventions, modify interventions, or intensify interventions/move the student to Tier III.

Per UCPS guidelines, once a Shiloh Elementary student enters into Tier III, they begin receiving more intensive, targeted interventions. Similarly to Tier II, many Tier III interventions are implemented by either the student's classroom teacher, teacher's assistant, and/or Literacy Interventionist within a small group. In addition to these interventions, depending on the presenting area of need, students in Tier III may be eligible for a Functional Behavior

Assessment (FBA) completed by the School Psychologist that is then used to inform a Behavior Intervention Plan. Students who are English Language Learners within Tier III of the intervention process are also eligible for a Language Proficiency Screening (*Woodcock-Muñoz Language Survey, Third Edition*) that is also completed by the School Psychologist. Similarly to Tier II, students within Tier III have their progress monitored after approximately six weeks to inform one of the following decisions: discontinue interventions, continue interventions, modify interventions, or intensify interventions/refer to Exceptional Children (special education/EC).

Although Shiloh Elementary has begun to implement the MTSS process as a means of supporting students and informing referrals to Exceptional Children, Shiloh's process is not always implemented consistently. As with any systems change, there is a "learning period;" Shiloh Elementary appears to be stuck in this phase, and continues to have room to grow, leaving educators within the building questioning the MTSS process altogether. Thus, in order to gain educator "buy in" and inform future professional development efforts targeted at implementing MTSS at Shiloh Elementary, better understanding of educators' perceptions surrounding MTSS is needed. This study sought to answer the following research questions:

Research Question 1: How do teachers perceive the process, structures, and impact of MTSS at Shiloh Elementary School?

Research Question 2: What components and/or practices facilitate the implementation of MTSS at Shiloh Elementary School?

Research Question 3: What components and/or practices hinder the implementation of MTSS at Shiloh Elementary School?

Research Question 4: Are there benefits to having teachers discuss differing perceptions of MTSS at Shiloh Elementary School?

Method

Participants

There were 26 participants in this study; all of which were general education teachers employed in Union County Public Schools in the state of North Carolina for the 2018-2019 academic year. Every participant signed up for this study voluntarily, no incentive was offered for participation.

Materials

To assess educators' perceptions about student learning, problem-solving, and expectations for instructional effectiveness, participants were asked to complete the North Carolina MTSS Beliefs Survey (Appendix A). The North Carolina MTSS Beliefs Survey was created to mirror the Florida Beliefs on RtI Scale that was originally developed by the Florida Problem-Solving/Response to Intervention Project team ("NC MTSS Beliefs Survey Description," 2018). The North Carolina MTSS Beliefs Survey is comprised of 17 5-point Likert scale items (1= Strongly Disagree; 2= Disagree; 3= Neutral; 4= Agree; 5= Strongly Agree).

A follow-up survey developed by the researcher for the purposes of this study (Appendix B) comprised of six 5-point Likert scale items (1= Strongly Disagree; 2= Disagree; 3= Neutral; 4= Agree; 5= Strongly Agree) was also administered to gain further insight into educators' perceptions about Multi-tiered Systems of Support.

Procedure

This study was designed with multiple data collections points: initial data collection took place in November 2018, discussion groups took place in March 2019, and follow-up data collection took place in May 2019. Participants were recruited voluntarily via email sent to K-5 general education teachers employed at Shiloh Elementary School in Union County, North

Carolina. Teachers were emailed in November 2018 with a brief description of the Ed.S. Research Proposal to provide rationale as well as an invitation to participate in the current study at an upcoming staff meeting (Appendix C). Primary data collection took place during the November 2018 staff meeting at Shiloh Elementary School. Upon beginning the study, participants were read an oral script that provided an overview of the topics covered as well as the procedure and thanked them for their participation (see Appendix D); after the oral script was read, participants were given an informed consent sheet to sign (Appendix E) prior beginning the North Carolina MTSS Beliefs Survey. Upon finishing the North Carolina MTSS Beliefs Survey, participants completed a short follow-up survey. To maintain anonymity, participants were asked to write their mother's maiden name, as well as the month they were born on their surveys in place of their name or other identifying information.

A second email was disseminated in following Shiloh Elementary School's Winter Break requesting participation in two discussion groups to share educators' perceptions of MTSS (Appendix F). Four of the twenty six original participants that completed the beliefs surveys in November 2018 responded indicating interest in participating in discussion groups. Discussion groups were held in March 2019. The purpose of these groups were to discuss educators' perceptions of student learning, problem-solving, and expectations for instructional effectiveness in an environment that is nonthreatening and nonevaluative.

Upon beginning the first discussion group, participants were read a short oral script (Appendix G) that provided an overview for the topics covered during the discussion group and thanked them for their continued participation in the study. Once the oral script was read, participants were given an informed consent to sign (Appendix H) prior to beginning the discussion group. Participants were asked to provide their mother's maiden name and the month

they were born on a sign-in sheet for tracking purposes. Questions asked during the discussion group were informed by the MTSS Beliefs Survey they completed in November 2018 (Appendix I). The discussion group was co-moderated by the researcher and her internship site supervisor. Participants' group conversations were audio recorded; audio recordings were kept for three days to allow the researcher to ensure that nothing was missed in the notes taken during the meetings. After three days, audio recordings were deleted. An alternative option was provided to individuals who did not wish to be audio recorded or participate in the discussion group, but were still interested in sharing their thoughts on MTSS with the researcher. These individuals were provided with the discussion group questions in an open ended survey format (Appendix J), thanked for their time and allowed to leave prior to the start of the discussion group. None of the discussion group participants chose the alternative measure. Prior to ending the first discussion group, participants were asked to choose a date that was convenient for them to attend the second, follow-up discussion group.

The second discussion group took place approximately one week after the initial discussion group. All four participants from discussion group one were in attendance during discussion group two. Questions asked during the discussion group were informed by the MTSS Beliefs Survey they completed in November 2018 (Appendix K). The discussion group was co-moderated by the researcher and her internship site supervisor. Participants' group conversations were audio recorded; audio recordings were kept for three days to allow the researcher to ensure that nothing was missed in the notes taken during the meetings. After three days, audio recordings were deleted. An alternative option was provided to individuals who did not wish to be audio recorded or participate in the discussion group, but were still interested in sharing their thoughts on MTSS with the researcher. These participants were offered the discussion group

questions in an open ended survey format (Appendix J), thanked for their time and allowed to leave prior to the start of the discussion group. Once again, none of the discussion group participants chose the alternative measure.

All teachers who completed the initial MTSS Beliefs Survey and follow-up questions in November 2018 received a follow-up email in May 2019 with a brief reminder of the Ed.S. Research Proposal as well as a request to continue participation in the current study at an upcoming staff meeting (Appendix L). Eight of the original twenty six participants that completed the beliefs surveys in November 2018 chose to participate in the second half of the study; three of these eight participants had previously participated in discussion groups one and two. Participants were re-read the oral script (see Appendix D); after the oral script was read, participants were given an informed consent sheet to review and sign (see Appendix E) prior to beginning the North Carolina MTSS Beliefs Survey. Upon finishing the North Carolina MTSS Beliefs Survey, participants completed a short follow-up survey. To maintain anonymity, participants were asked to write their mother's maiden name, as well as the month they were born on their surveys in place of their name or other identifying information. This information was used to match surveys obtained during the primary data collection date in November 2018 to surveys obtained in the secondary data collection date in May 2019.

Results

Survey items were presented to participants in 5-point Likert scale questions. Themes that emerged during discussion groups one and two were recorded by the discussion group facilitators. These items were summarized and change scores were compared via a Microsoft Excel document. Information from this document and overarching themes from the discussion groups have been summarized below.

Research Question One

In order to determine how teachers perceived the process, structures, and impact of MTSS at Shiloh Elementary School, twenty six teachers were surveyed in November 2018 about their perceptions and beliefs of MTSS; they recorded their responses on 5-point Likert scales.

Table 1.

<i>Initial NC MTSS Beliefs Survey Results</i>		
Survey Item	%	Descriptive Category
All subgroups can reach proficiency	60.0%	Majority Strongly Agreed/Agreed
Tier I should result in 80% of students meeting reading benchmarks	84.6%	Majority Strongly Agreed/Agreed
Tier I should result in 80% of students meeting math benchmarks	80.8%	Majority Strongly Agreed/Agreed
Universal instruction in SEL is the school's responsibility	53.9%	Majority Strongly Agreed/Agreed*
Tier II is to ensure students meet grade level benchmarks	50.0%	Majority Strongly Agreed/Agreed
Tier III is to ensure students are growing towards benchmarks	83.0%	Majority Strongly Agreed/Agreed
Students with SLD can achieve benchmarks in reading/math	42.3%	Majority Strongly Agreed/Agreed*
Students with behavioral problems can achieve benchmarks in reading/math	61.5%	Majority Strongly Agreed/Agreed
Some students identified SLD do not have a disability, but rather haven't had appropriate instruction	34.6%	Majority Strongly Disagreed/Disagreed*
Additional time/resources should go to students who are not reaching benchmarks	69.2%	Majority Strongly Agreed/Agreed
Graphing student data makes it easier to make decisions	42.3%	Majority Strongly Agreed/Agreed
Families should be involved in problem solving	96.2%	Majority Strongly Agreed/Agreed

When a student doesn't respond to an intervention, the intervention's fidelity should be examined	88.4%	Majority Strongly Agreed/Agreed
When a student doesn't respond to an intervention, diagnostic assessment should be used to identify the root cause	88.5%	Majority Strongly Agreed/Agreed

**Indicates a split between majority and another answer choice <10%*

When participants were asked if they believed that all subgroups, including racial, ethnic, economic, and program area, could reach proficiency with the current core standards, 28% strongly agreed, 32% agreed, 4% reported feeling neutral, 32% disagreed, and 4% strongly disagreed; one participant skipped this item.

When participants were asked if they believed that Tier I/Core Instruction should be effective enough to result in at least 80% of students achieving benchmarks in Reading, 34.6% strongly agreed, 50% agreed, 7.7% reported feeling neutral, 7.7% disagreed, and 0% strongly disagreed.

When participants were asked if they believed that Tier I/Core Instruction should be effective enough to result in at least 80% of students achieving benchmarks in Math, 34.6% strongly agreed, 46.2% agreed, 7.7% reported feeling neutral, 11.5% disagreed, and 0% strongly disagreed.

When participants were asked if they believed universal instruction in behavioral expectations and social skills is the responsibility of the public schools, 15.4% strongly agreed, 38.5% agreed, 0% felt neutral, 23.1% disagreed, and 23.1% strongly disagreed.

When participants were asked if they believed that the primary function of Tier II/Supplemental Instruction & Interventions is to ensure that students achieve grade level

benchmarks, 7.7% strongly agreed, 42.3% agreed, 19.2% reported feeling neutral, 26.9% disagreed, and 3.8% strongly disagreed.

When participants were asked if they believed that the primary function of Tier III/Intensive Instruction & Intervention is to ensure that students are growing towards achieving grade level benchmarks, 23% strongly agreed, 50% agreed, 15.4% reported feeling neutral, 7.7% disagreed, and 3.8% strongly disagreed.

When participants were asked if they believed that the majority of students with Specific Learning Disabilities can achieve grade level benchmarks in Reading and/or Math 3.8% strongly agreed, 38.5% agreed, 19.2% reported feeling neutral, 26.9% disagreed, and 11.5% strongly disagreed.

When participants were asked if students with behavioral problems can achieve benchmarks in Reading or Math, 7.7% strongly agreed, 53.8% agreed, 11.5% reported feeling neutral, 26.9% disagreed, and 0% strongly disagreed.

When participants were asked if they believed that additional staff support would enable regular education teachers to implement more differentiated instruction to meet the needs of all students, 69.2% strongly agreed and 30.8% agreed; 0% of participants felt neutral, disagreed, or strongly disagreed.

When participants were asked if they believed that prevention and early intervention results in fewer referrals to Special Education, 61.5% strongly agreed, 34.6% agreed, 3.8% reported feeling neutral, and 0% disagreed or strongly disagreed.

When participants were asked if they believed that some students currently identified with a Specific Learning Disability do not have a true disability, but rather did not receive

adequate instruction and intervention to close the gap in their skills 7.7% strongly agreed, 23.1% agreed, 34.6% reported feeling neutral, 26.9% disagreed, and 7.7% strongly disagreed.

When participants were asked if they believed additional time and resources should be allocated first to students who are not reaching benchmarks, 11.5% strongly agreed, 57.7% agreed, 23.1% reported feeling neutral, 7.7% disagreed, and 0% strongly disagreed.

When participants were asked if graphing student data makes it easier for educators to make decisions about student performance and necessary interventions, 11.5% strongly agreed, 30.8% agreed, 30.8% reported feeling neutral, 23.1% disagreed, and 3.8% strongly disagreed.

When participants were asked if they believed that students' families should be involved in problem solving, 65.4% strongly agreed, 30.8% agreed, and 3.8% reported feeling neutral; 0% disagreed or strongly disagreed.

When participants were asked if they believed that when students do not respond to instruction and/or intervention, the fidelity as well as the intensity of the intervention implementation and if different intervention is needed should be examined, 34.6% strongly agreed, 53.8% agreed, 7.7% reported feeling neutral, 3.8% disagreed, and 0% strongly disagreed.

When participants were asked if they believed that when students do not respond to instruction and/or intervention, teams should ensure that the problem was thoroughly analyzed through diagnostic assessments to determine the cause of the skill gap, 42.3% strongly agreed, 46.2% agreed, 7.7% reported feeling neutral, 3.8% disagreed, and 0% strongly disagreed.

Table 2.

<i>Initial Follow-Up Survey Questions</i>		
Survey Item	%	Descriptive Category
MTSS will be helpful to students & teachers at Shiloh Elementary	73%	Majority Strongly Agreed/Agreed

I struggle to learn new techniques/implement interventions in my class	42.3%	Majority Strongly Disagreed/Disagreed*
Staff-wide development will increase my self-efficacy surrounding MTSS	73%	Majority Strongly Agreed/Agreed
It is difficult to find the time to implement new interventions in my class	83.1%	Majority Strongly Agreed/Agreed
I can easily find resources for evidence-based interventions	57.7%	Majority Strongly Disagreed/Disagreed

*Indicates a split between majority and another answer choice <10%

When participants were asked if they were excited about the potential benefits of implementing MTSS at Shiloh Elementary, 11.5% strongly agreed, 61.5% agreed, 19.2% reported feeling neutral, 3.8% disagreed, and 3.8% strongly disagreed.

When participants were asked if they believed that MTSS will be helpful to students and teachers at Shiloh Elementary, 19.2% strongly agreed, 53.8% agreed, 19.2% reported feeling neutral, 3.8% disagreed, and 3.8% strongly disagreed.

When participants were asked if they struggled with learning new techniques and implementing interventions in their classrooms, 11.5% strongly agreed, 26.9% agreed, 19.2% reported feeling neutral, 30.8% disagreed, and 11.5% strongly disagreed.

When participants were asked if they believed that staff-wide development would be helpful in increasing their self-efficacy surrounding MTSS, 15.4% strongly agreed, 53.8% agreed, 19.2% reported feeling neutral, 7.7% disagreed, and 3.8% strongly disagreed.

When participants were asked if they believed that it would be difficult to find the time to implement new interventions in their classroom, 23.1% strongly agreed, 50% agreed, 7.7% reported feeling neutral, 15.4% disagreed, and 3.8% strongly disagreed.

When participants were asked if they could easily find resources for evidence-based interventions in their classroom, 11.5% strongly agreed, 23.1% agreed, 7.7% reported feeling neutral, 46.2% disagreed, and 11.5% strongly disagreed.

Research Question Two

In order to determine what components and/or practices facilitated the implementation of MTSS at Shiloh Elementary School, teachers that completed the initial MTSS Beliefs Survey in November 2018 were invited to participate in discussion groups that were held in March 2019; four regular education teachers participated in groups one and two. Motivational Interviewing techniques were employed during the facilitation of the groups. The purpose of these groups were to provide a space for educators to discuss their perceptions of student learning, problem-solving, and expectations for instructional effectiveness with their colleagues in an environment that is nonthreatening and nonevaluative.

One of the themes that emerged during discussion groups one and two, was what Shiloh Elementary is already doing well in preparation for the roll out of MTSS in 2020. Teachers were unanimous in their report that they felt fortunate that Shiloh Elementary had been training staff for a “couple of years.” This gradual training has provided teachers with a trial and error period, rather than waiting until the 2019-2020 year to attempt to implement MTSS for the first time right before it rolls out in July 2020. Teachers felt that Shiloh Elementary has taken advantage of the four year “buffer” period between when North Carolina’s Specific Learning Disability policy change was introduced in February 2016 and when implementation is compulsory state-wide in July 2020 (NC MTSS Implementation Guide: SLD Policy Change Fact Sheet, 2016).

Another theme that emerged during discussion groups is the Literacy Interventionist position that was introduced this year. Teachers reported feeling supported by the Interventionist

and her progress with their students has made them hopeful for the eventual MTSS roll out. Adding a full-time Interventionist has left teachers feeling more supported by members of Shiloh Elementary administration, as her ability to pull small groups for Tier II and Tier III intervention has lessened their responsibility to do so in their classrooms, thus allotting them more time to focus on delivering quality, evidence-based core instruction (Tier I).

Another theme that emerged during discussion groups was the development of Shiloh Elementary's "Data Dashboard." Teachers reported feeling confident about their data collection efforts when provided with explicit interventions and data points. Teachers followed this by sharing that the Data Dashboard has made it easy for groups (such as individual grade level teams and/or the MTSS team) to examine student data on a large scale to inform decisions.

In addition to their reports of having a "trial and error" period to attempt to roll out MTSS, the newly hired position of Literacy Interventionist to assist them with Tier II and Tier III interventions, and the creation of a Data Dashboard, teachers reported that their experiences with MTSS at Shiloh Elementary thus far have made them hopeful for a successful implementation in 2020. Each teacher shared specific examples of students within their classrooms that have benefited from the intervention processes already in place at Shiloh Elementary. Additionally, teachers shared that prior to Shiloh Elementary's efforts to implement a Multi-tiered System of Supports in order to identify students with Specific Learning Disabilities, it was not as obvious or apparent when a student truly needed Exceptional Children's services or not.

Research Question Three

In order to determine what components and/or practices hinder the implementation of MTSS at Shiloh Elementary School, teachers that completed the initial MTSS Beliefs Survey in

November 2018 were invited to participate in discussion groups that were held in March 2019; four regular education teachers participated in groups one and two. While teachers who participated in the aforementioned discussion groups had positive things to share in terms of what Shiloh Elementary is already doing well in preparation of state-wide implementation of MTSS in 2020, themes discussing practices that hinder the implementation of MTSS were much more salient during both discussion groups.

One of the most discussed improvements necessary to make Shiloh Elementary more successful in its implementation of MTSS in the future is the need for additional resources. Although teachers cited their gratitude for Shiloh's full time Interventionist, they were realistic in their understanding that she is only one person who is expected to support hundreds of students within the building. Due to the Interventionist's caseload, at this time, she is only able to support students in the area of Literacy, thus leaving teachers responsible for all students in need of Math and/or Behavioral supports. By increasing resources and employing more Interventionists, teachers believed that they would have more time to devote to providing quality Tier I core instruction, thus their students would have a higher chance of success within the MTSS process as a whole.

Another theme that emerged within discussions groups was the need for increased curriculum supports. Teachers reported feeling like Union County Public Schools (UCPS) needs to invest in "stronger core instruction" prior to implementing MTSS in 2020. While this issue is not specific to Shiloh Elementary, but rather Union County as a whole, the perceived failure to provide appropriate core instruction is believed to negatively impact teachers and students at Shiloh Elementary. Teachers unanimously agreed that they have been left feeling like they are "failing" their students due to the UCPS's current curriculum. They shared that it will be

important to restructure UCPS's core curriculum in order to match the students within the county. By improving core curriculum (Tier I), teachers at Shiloh Elementary believe that the school as a whole would be more successful, thus decreasing the number of students who require Tier II and Tier III interventions in the first place.

A final theme that emerged during the discussion groups was the need for a clearer vision of the MTSS process, including clear expectations provided from "the top down," or in other words, administration. Teachers at Shiloh Elementary reported feeling like members of administration believe that Shiloh Elementary is further along in the MTSS implementation than they really are. While Shiloh has taken steps to implement MTSS within the building, such as creating an MTSS team, creating the data dashboard, hiring an interventionist, and using data to guide their decisions, these changes are not always done consistently, or with fidelity. Teachers reported having MTSS team meetings frequently rescheduled, thus throwing off the timeline of interventions and progress monitoring. They also reported feeling "lost" in terms of being left to decide on appropriate interventions for their students who are struggling. In order to remediate these concerns, teachers reported feeling that it is necessary to place MTSS as a top priority at Shiloh Elementary, and operate on a nonnegotiable six-week cycle when delivering interventions before reviewing data as a team every seventh week. In addition to making meetings more consistent, teachers reported the need for interventions in addition to those provided by UCPS's standard treatment protocol. While teachers feel that before Shiloh Elementary can move forward and successfully implement MTSS school-wide, a universal "intervention bank" needs to be created, detailing specific interventions to use, grouped by skill deficit and current ability level to remove the "guess work" from choosing and implementing an intervention with a struggling student.

Research Question Four

In order to determine if there are benefits to having teachers discuss differing perceptions of MTSS at Shiloh Elementary School, teachers were invited to participate in two discussion groups following their initial participation in this study. Questions asked during the discussion groups were informed by the MTSS Beliefs Survey, guided by a motivational interviewing framework.

On average, teachers who chose to participate in the discussion groups reported higher scores on their MTSS Beliefs Survey in May than they initially did in November.

Table 3

<i>Discussion Groups Participants' MTSS Change Scores</i>	
	Change Scores May - November
MTSS Beliefs Survey 1	$3.3 - 3.3 = 0.0$
MTSS Beliefs Survey 2	$4.3 - 4.3 = 0.0$
MTSS Beliefs Survey 3	$4.3 - 4.3 = 0.0$
MTSS Beliefs Survey 4	$4.0 - 3.3 = 0.7$
MTSS Beliefs Survey 5	$3.0 - 2.7 = 0.3$
MTSS Beliefs Survey 6	$4.0 - 3.3 = 0.7$
MTSS Beliefs Survey 7	$3.7 - 3.7 = 0.0$
MTSS Beliefs Survey 8	$3.7 - 3.7 = 0.0$
MTSS Beliefs Survey 9	$4.3 - 4.0 = 0.3$
MTSS Beliefs Survey 10	$5.0 - 5.0 = 0.0$
MTSS Beliefs Survey 11	$4.3 - 4.7 = -0.4$

MTSS Beliefs Survey 12	$3.3 - 3.7 = -0.4$
MTSS Beliefs Survey 13	$3.3 - 3.0 = 0.3$
MTSS Beliefs Survey 14	$3.3 - 2.0 = 1.3$
MTSS Beliefs Survey 15	$4.7 - 4.7 = 0.0$
MTSS Beliefs Survey 16	$4.7 - 4.0 = 0.7$
MTSS Beliefs Survey 17	$4.3 - 4.3 = 0.0$

Teachers who chose to participate in discussion groups only reported lower scores when surveyed in May in comparison to their scores in November on two out of seventeen questions.

- 11) Prevention and early intervention results in fewer referrals to Special Education*
12) Some students currently identified as having a Specific Learning Disability do not have a true disability but rather did not receive instruction and intervention of adequate intensity to close the gap in their skill levels

On average, teachers who did not choose to participate in the discussion groups reported lower scores on their MTSS Beliefs Survey in May than they initially did in November.

Table 4

<i>No Discussion Groups MTSS Participants' Change Scores</i>	
	Change Scores May - November
MTSS Beliefs Survey 1	$2.4 - 2.8 = -0.4$
MTSS Beliefs Survey 2	$3.8 - 3.4 = 0.4$
MTSS Beliefs Survey 3	$3.6 - 3.0 = 0.6$
MTSS Beliefs Survey 4	$3.4 - 3.0 = 0.4$
MTSS Beliefs Survey 5	$2.6 - 3.0 = -0.4$
MTSS Beliefs Survey 6	$4.0 - 3.2 = 0.8$

MTSS Beliefs Survey 7	$2.2 - 2.4 = -0.2$
MTSS Beliefs Survey 8	$2.2 - 2.4 = -0.2$
MTSS Beliefs Survey 9	$2.8 - 3.4 = -0.6$
MTSS Beliefs Survey 10	$3.4 - 4.4 = -1.0$
MTSS Beliefs Survey 11	$4.6 - 4.6 = 0.0$
MTSS Beliefs Survey 12	$3.2 - 3.8 = -0.6$
MTSS Beliefs Survey 13	$3.4 - 3.8 = -0.4$
MTSS Beliefs Survey 14	$2.8 - 3.2 = -0.4$
MTSS Beliefs Survey 15	$4.6 - 5.0 = -0.4$
MTSS Beliefs Survey 16	$3.2 - 3.8 = -0.6$
MTSS Beliefs Survey 17	$3.0 - 4.0 = -1.0$

Teachers who did not chose to participate in discussion groups reported lower scores when surveyed in May in comparison to their scores in November on twelve out of seventeen questions:

- 1) *I believe that all subgroups (i.e. racial, ethnic, economic, and program area) can reach proficiency with the current standards.*
- 5) *The primary function of Tier Two or supplemental instruction/intervention is to ensure students achieve grade level benchmarks.*
- 7) *The majority of students with Specific Learning Disabilities can achieve grade-level benchmarks in Reading.*
- 8) *The majority of students with Specific Learning Disabilities can achieve grade-level benchmarks in Math.*
- 9) *The majority of students with Specific Learning Disabilities can achieve grade-level benchmarks in Reading and Math.*
- 12) *Some students currently identified as having a Specific Learning Disability do not have a true disability but rather did not receive instruction and intervention of adequate intensity to close the gap in their skill levels*
- 13) *Additional time and resources should be allocated first to students not reaching benchmarks.*
- 14) *Graphing student data makes it easier for educators to make decisions about student performance and needed interventions.*
- 15) *A student's family should be involved in problem solving.*
- 16) *When students do not respond to instruction and/or intervention, the following should be*

examined: a) the intervention was implemented with fidelity, b) the intervention was delivered with sufficient intensity, and c) a different intervention is needed.

17) When students do not respond to instruction and/or intervention, teams should ensure that the problem was thoroughly analyzed through diagnostic assessments/processes to find the root cause of the skill gap.

On average, teachers who chose to participate in the discussion groups reported more positive change scores on their follow up questions in May than they initially did in November.

Table 5.

<i>Discussion Groups Participants' Follow Up Change Scores</i>	
	Change Scores May – November
Follow Up 1	$4.0 - 4.0 = 0.0$
Follow Up 2	$4.0 - 4.0 = 0.0$
Follow Up 3	$2.6 - 3.7 = -1.1^*$
Follow Up 4	$4.0 - 4.3 = -0.3$
Follow Up 5	$4.0 - 4.3 = -0.3^*$
Follow Up 6	$3.0 - 2.6 = 0.4$

**Indicates items that are reversed scored*

Teachers who chose to participate in discussion groups reported more negative scores when surveyed in May in comparison to their scores in November on only one out of six questions:

4) *Staff-wide professional development will be helpful in increasing my self-efficacy surrounding MTSS.*

Although question three and question five's change scores appear to be negative, these questions were reverse scored, thus indicating a more positive score in May than initially reported in November.

On average, teachers who did not choose to participate in the discussion groups reported slightly less positive change scores on their follow up questions in May than they initially did in November.

Table 6.

<i>No Discussion Groups Participants' Follow Up Change Scores</i>	
	Change Scores May – November
Follow Up 1	$3.2 - 3.6 = \mathbf{-0.4}$
Follow Up 2	$3.4 - 3.6 = \mathbf{-0.2}$
Follow Up 3	$2.8 - 3.6 = -0.8^*$
Follow Up 4	$3.4 - 3.4 = 0.0$
Follow Up 5	$4.4 - 4.0 = \mathbf{0.4}^*$
Follow Up 6	$1.8 - 2.8 = \mathbf{-1.0}$

**Indicates items that are reversed scored*

Teachers who did not choose to participate in discussion groups reported more negative when surveyed in May in comparison to their scores in November on three out of six questions:

- 1) *I am excited about the potential benefits of implementing Multi-tiered Systems of Support (MTSS) at Shiloh*
- 5) *It will be difficult to find time to implement new interventions in my classroom*
- 6) *I can easily find resources for evidence-based interventions in my classroom*

Although question five's change scores appear to be positive, this questions is reverse scored, thus indicting a less positive score in May than initially reported in November.

In addition to the quantitative differences observed in change scores between teachers who participated in discussion groups and teachers who did not, teachers who participated in

discussion groups provided a very positive narrative about their experience. Following participation in discussion groups one and two, teachers shared that having the opportunity to discuss their thoughts surrounding the roll out of MTSS has not only helped them prepare for systems change, but also validate their feelings. Teachers described participation within the discussion groups as “so beneficial,” and shared their gratitude for having a space to hear others’ are feeling similarly about what Shiloh Elementary is doing well and what Shiloh Elementary needs to change before implementing MTSS.

Discussion

The results from this study provide a narrative of current practices at Shiloh Elementary, including what is currently being done successfully, as well as areas of growth that need to be addressed prior to implementing MTSS in the 2020-2021 academic school year. Results also highlight how beneficial it is for educators to be provided with a safe, nonthreatening environment to process their thoughts surrounding systems change with their colleagues.

The perceptions surrounding the implementation of a Multi-tiered System of Supports of general education teachers at Shiloh Elementary varies. While some teachers are hopeful for the implications, including proposed positive student outcomes associated with the state-wide roll out of MTSS, others are hesitant and resistant to such a large scale change. Teacher participation in discussion groups illuminated what practices are currently facilitating, as well as hindering the implementation of MTSS at Shiloh Elementary. Apparent themes that emerged in terms of Shiloh Elementary’s successes thus far with implementing MTSS within their building included being proactive in their attempt to implement MTSS by taking advantage of the four year buffer built into this policy change by North Carolina’s Department of Education. Rather than waiting until the policy is compulsory in 2020, Shiloh Elementary has already begun to implement a

MTSS process within the building. Teachers also felt that Shiloh Elementary has been successful in hiring a full time Interventionist to support students within the building. By creating this new position, Shiloh Elementary has left teachers feeling more supported, and allotted teachers more time to focus on implementing quality, evidence-based core instruction. Not only have these existing efforts to roll-out MTSS been beneficial for Shiloh Elementary teachers, they are supported by the literature. McIntosh & Goodman (2016) stress the importance and necessity of establishing multiple teams (which sometimes entails creating new positions to be members of these teams, such as an Interventionist) when rolling out MTSS. Teams that can emerge within systems implementing MTSS may include an individual student team, a classroom team, grade-level teams, a school leadership team, and a student support team. The “fundamental function” of creating teams is to “distribute the workload among multiple individuals [...in order to] make the work efficient and reduce burnout” (McIntosh & Goodman, 2016, p. 162). By creating a MTSS team, grade-level teams, and hiring a full time Interventionist, Shiloh Elementary is supporting its teachers by reducing their work load, thus taking appropriate measures to reduce the likelihood of teacher burnout or initiative fatigue.

Another component of MTSS implementation that Shiloh Elementary has been successful with is the creation of a “Data Dashboard.” This Data Dashboard has provided a space for all teachers to share data with one another, thus making it easier to examine data efficiently to inform decisions regarding students’ progress and movement throughout the tiers of the intervention process. Once again, Shiloh’s preexisting practices in MTSS implementation are supported by the literature, which is a likely explanation of their perceived success. McIntosh & Goodman (2016) discuss the importance of collecting and integrating data in a way that is efficient, thus making interpretation of the data less daunting and more approachable to school

personnel. While Shiloh Elementary's Data Dashboard contains data from every classroom, teachers did not report feeling overwhelmed, but rather, thankful that the data was available in one place, therefore making it more accessible for teams during decision making processes.

In addition to these successes, teachers shared that their personal experiences with MTSS (such as individual student success) at Shiloh Elementary have resulted in them feeling hopeful for a smooth transition to utilization of MTSS in the future.

Despite these aforementioned successes, teachers' concerns surrounding current practices at Shiloh that hinder the implementation of MTSS were much more salient. While hopeful for a smooth transition to MTSS, teachers understand that changes must be made between now and July 2020 when MTSS implementation becomes compulsory. Concerns included the need for additional resources (such as more full time Interventionists to support teachers and students), increased curriculum supports county-wide and/or an overhaul of the current core curriculum, and a more explicit and consistent process to follow (i.e. scheduled MTSS meetings to review data and progress monitor as well as access to more evidence-based interventions). Although the results of this study are specific to one school building, many of the identified benefits and concerns experienced in this school are supported by the literature, and therefore may hold implications for consideration in other systems implementing MTSS. For example, Shiloh Elementary teachers' concerns with Union County Public Schools' core curriculum align with research indicating that all students should have access to high quality instruction of a core curriculum (Manglia, 2017). If students are universally provided with an appropriate core curriculum (Tier I), at least 80% of the student population is expected to meet benchmark expectations; on the other hand, if 80% or less of the student population is unable to reach benchmark goals, the issues is not student-based, but rather a reflection of a faulty core

curriculum and/or instruction (McCook 2006). Shiloh Elementary teachers reported feeling like they were “failing” their students with the current core curriculum provided by Union County Public Schools. They followed this statement by sharing their beliefs that if core curriculum was updated, thus more effective and reaching a greater number of students, there would be a lesser need to refer students to Tiers II and III of the MTSS process.

In addition to the narrative of practices that facilitate and hinder the implementation of MTSS at Shiloh Elementary, this study also provided a narrative that highlights the importance of providing educators’ a space to process their thoughts. On average, teachers who chose to participate in discussion groups to share their thoughts surrounding the implementation of MTSS at Shiloh reported more positive perceptions of MTSS than teachers who did not chose to participate in discussion groups, as evidenced by change scores between teacher ratings of MTSS in November 2018 compared to May 2019. Anecdotally, in addition to the aforementioned quantitative data, teachers who participated in discussion groups described having the opportunity to share their ideas with their colleagues as “validating” and “beneficial.” The researcher actually had to turn multiple teachers away from the second discussion group (participants could only attend discussion group two if they were in attendance of the first). This suggests that teachers who participated in the discussion groups shared the perceived benefits of having a non-evaluative, non-threatening space to share their thoughts about this upcoming educational initiative with their colleagues, thus sparking interest among others within the building.

Limitations

Despite the findings of this study that contributed to the narrative of educators’ perceptions of the implementation of MTSS at Shiloh Elementary, there are limitations that

should be addressed in future research. The largest limitations of the present study are the small sample size, its lack of diversity, and lack of continuation by participants within the study.

The current study's participants were only comprised of regular education teachers at Shiloh Elementary, despite Exceptional Children's teachers, teacher's assistants, and additional support staff (such as the school counselor, interventionist, and administrators) requesting to participate as well. Additionally, although twenty six general education teachers chose to participate in the initial NC MTSS Beliefs Survey and follow up questions in November 2018, only eight general education teachers chose to participate in the second NC MTSS Beliefs Survey and follow up questions in May 2019. A possible explanation of the low response rate during the second half of data collection is likely related to the introduction of another large system change during the current study. In March 2019 (just prior to the first discussion group), Shiloh administration announced that Shiloh Elementary would be merging with a neighboring elementary school, Sun Valley Elementary. The vision for this change included making the previous Sun Valley Elementary a K-2 building, while Shiloh Elementary would become a 3-5 building. Teachers described the introduction of "Shiloh Valley" as somewhat overwhelming and unexpected. Additionally, while the Shiloh Valley announcement was initially made in March 2019, the majority of teachers were not given their school or room assignments (which were directly related to the grade-level they would be teaching the following year) until May 2019. Therefore, it is possible that the added stress of an outside system change negatively impacted the response rate of the current study. Thus, with only 30% of the original participants completing the study in entirety, paired with the small sample size and its lack of diversity, the results of this study cannot be generalized to Shiloh Elementary as a whole.

An additional limitation to the current study was the self-report measures that assessed potentially sensitive topics in the presence of the researcher. While participants were assured that their responses regarding their perceptions of MTSS would be kept completely confidential, it is possible that participants may have felt uncomfortable disclosing such information, especially when the researcher and her supervisor were in the room.

Implications for Future Research and Practice

After examining the previously discussed findings and limitations, it would be beneficial to expand the current study in a few ways. First, it would be worthwhile to replicate this study with staff members at Shiloh Elementary next academic year before the state-wide roll out of MTSS. However, rather than only surveying general education teachers about their perceptions of MTSS, participation would be expanded to all educators within Shiloh Elementary's building (such as counselors, reading specialists, interventionists, Exceptional Children's teachers, and teaching assistants). This would not only increase the sample size, thus possibly yielding more significant results, but also result in a sample more that is more representative of Shiloh Elementary as a whole.

Secondly, in addition to expanding the participant pool, it would be interesting to ask participants demographic questions in addition to their survey questions such as gender, role within the school, grade level (if appropriate), number of years as a teacher, and number of years as a teacher at Shiloh Elementary. This information could be analyzed to determine if extraneous variables impact educators' perceptions of the implementation of MTSS at Shiloh Elementary.

A final change to the current study in future research would be to change the format in which surveys are administered to participants. Rather than administering surveys on only two

dates (one in the fall and one in the spring) in person at staff meetings, perhaps making the surveys available online for a window of time (such as two weeks in the fall followed by two weeks in the spring) would result in a higher percentage of participation, as well as more honest answers. Offering the survey online and making it available for two weeks at a time would provide participants with more flexibility and perhaps make them feel more comfortable by providing the opportunity to disclose their perceptions of MTSS implementation in private.

The most salient implication for future practice in the field of School Psychology that emerged was how multi-faceted a School Psychologist's role can and should be during systems change, such as implementing a new educational initiative like MTSS. The current study highlighted the necessity of employing evidence-based practice when attempting systems change. In the future, School Psychologists should continue utilize the Four C's of Context, Conceptual Model, Capacity, and Collaboration (Gilligan, 2017) when approaching systems change. However, in addition to this framework, it would be beneficial for School Psychologists to seek out opportunities to further integrate themselves into their system as a means provide support in various ways during systems change. This could be accomplished by providing education on the subject matter, such as staff trainings on MTSS. Providing evidence-based trainings guided by the current research could decrease the likelihood of confusion among staff members. Additionally, by increasing the staff's knowledge base, staff-wide trainings could in turn increase their feelings of self-efficacy surrounding MTSS.

Another way that School Psychologists can aid in the implementation of MTSS is by ensuring that they are a consistent and required member of the MTSS team. Participating during MTSS meetings would be beneficial in a number of ways. First, School Psychologists are thought to be the experts in tiered levels of support within their field, therefore they could aid the

team in interpreting data and progress monitoring in a way that results in fewer referrals to Special Education. Additionally, School Psychologists have access to many evidence-based interventions and supports, and therefore could serve as an “intervention bank” to other members of the MTSS team.

A final way for School Psychologists to support their buildings during systems change is by offering opportunities for teachers to feel heard and supported. This could be accomplished by discussion groups, such as the ones held in the current study, monthly teacher wellness workshops to decrease stress, and/or follow-up consultation with teachers who are implementing interventions within their classrooms to check in on the success of the intervention and answer any questions teachers may have.

Overall, the current study yielded an interesting narrative to help readers to better understand what factors contribute to the current success of MTSS implementation at Shiloh Elementary, what factors are hindering further success of MTSS implementation at Shiloh Elementary, and the benefits of providing educators with a safe, non-threatening and non-judgmental space in which to share their thoughts and feelings surrounding MTSS implementation at Shiloh Elementary with their colleagues. While the results of the current study offer a new perspective on educators’ perceptions of the implementation of MTSS within Shiloh Elementary School in Union County, North Carolina, strengths and weaknesses identified within this study are supported by the literature surrounding MTSS, and therefore can be generalized and applied to other systems in the process of implementing MTSS within their buildings.

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Appendix A



Rate each item in the following way: 1= Strongly Disagree, 2= Disagree, 3= Neutral, 4= Agree, 5 = Strongly Agree		Score (1-5)
1	I believe that all subgroups (i.e., racial, ethnic, economic and program area) can reach proficiency with the current standards.	
2	Tier One or Core Instruction (classroom instruction provided to all students) should be effective enough to result in at least 80 % of students achieving benchmarks in Reading with Tier One alone.	
3	Tier One or Core Instruction (classroom instruction provided to all students) should be effective enough to result in at least 80 % of students achieving benchmarks in Math with Tier One alone.	
4	Universal instruction in behavioral expectations and social skills is the responsibility of the public schools.	
5	The primary function of Tier Two or supplemental instruction/intervention is to ensure students achieve grade level benchmarks.	
6	The primary function of Tier Three or intensive instruction/intervention is to ensure students are growing toward achieving grade level benchmarks.	
7	The majority of students with Specific Learning Disabilities can achieve grade-level benchmarks in Reading.	
8	The majority of students with Specific Learning Disabilities can achieve grade-level benchmarks in Math.	
9	The majority of students with behavioral problems can achieve grade-level benchmarks in Reading and Math.	
10	Additional staff support would enable regular education teachers to implement more differentiated instruction to meet the needs of all students.	
11	Prevention and early intervention results in fewer referrals to Special Education.	
12	Some students currently identified as having a Specific Learning Disability do not have a true disability but rather did not receive instruction and intervention of adequate intensity to close the gap in their skill levels.	
13	Additional time and resources should be allocated first to students not reaching benchmarks.	
14	Graphing student data makes it easier for educators to make decisions about student performance and needed interventions.	
15	A student's family should be involved in problem-solving.	
16	When students do not respond to instruction and/or intervention, the following should be examined: a) the intervention was implemented with fidelity, b) the intervention was delivered with sufficient intensity, and c) a different intervention is needed.	
17	When students do not respond to instruction and/or intervention, teams should insure that the problem was thoroughly analyzed through diagnostic assessments/processes to find the root cause of the skill gap.	

 Mother's Maiden Name

 Your Birth Month

Appendix B

Questions Following MTSS Beliefs Survey

Please read the following questions carefully and rate each item accordingly.

I am excited about the potential benefits of implementing Multi-tiered Systems of Support (MTSS) at Shiloh Elementary.

1	2	3	4	5
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

I believe that MTSS will be helpful to students and teachers at Shiloh Elementary.

1	2	3	4	5
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

I struggle with learning new techniques and implementing interventions in my classroom.

1	2	3	4	5
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

Staff-wide professional development will be helpful in increasing my self-efficacy surrounding MTSS.

1	2	3	4	5
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

It will be difficult to find the time to implement new interventions in my classroom.

1	2	3	4	5
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

I can easily find resources for evidence-based interventions in my classroom.

1	2	3	4	5
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

 Mother's Maiden Name

 Your Birth Month

Appendix C

Invitation Email:

Good afternoon,

As many of you know, my name is Lyndsay Greene and I am currently serving Shiloh Elementary School as a graduate level school psychology intern under the supervision of Sara Ryan. I am currently in the process of completing a research project for fulfillment of my Educational Specialist Degree at James Madison University.

For purposes of this project, I have decided to evaluate educators' perceptions of the Multi-Tiered System of Supports (MTSS) initiative that North Carolina will begin in the upcoming academic year. As such, I would like to invite you to participate in a short survey about your perceptions of MTSS during the next staff meeting. Participation will take no longer than 15 minutes; more details will be provided prior to beginning the study.

Thank you for your consideration, I look forward to seeing you soon!

Appendix D

Oral Script

“Good afternoon everyone. Thank you for coming and participating in my study. In this study, you will be given the MTSS Beliefs Survey, which is comprised of 17 items, in addition to a follow-up survey comprised of 6 items. This study will assess your perceptions about student learning, problem-solving, and expectations for instructional effectiveness.

“A consent form will be read, signed, and handed in to the researcher before beginning your survey. You will also receive a copy of the consent form for your reference. By signing the consent form you are assuring the research staff that you are an employee of Shiloh Elementary School in Union County, NC. If you are not an employee at Shiloh Elementary, please discontinue your participation in this study at this time.

“Prior to beginning the MTSS Beliefs Survey, you will be asked to write your mother’s maiden name in place of your name at the top of the survey. This information will be used for matching purposes later in the study. Once you have written your mother’s maiden name and answered the 17 items on the North Carolina MTSS Beliefs survey, and the 6 follow-up questions, you will hand your completed survey to me. I will thank you for your participation and you will leave with your copy of the informed consent.

“Your participation in this study is completely voluntary and if you do not wish to continue, you may leave at any time. Your completed assessments will be anonymous and will only be used for the purposes of this research study. There is no compensation for participating in this study; again your participation is completely voluntary. My contact information can be found on your copy of the informed consent along with the contact information of my thesis committee chair, Dr. Deborah Kipps-Vaughan.”

Appendix E

Informed Consent Agreement

Please read this consent agreement carefully before you decide to participate in the research study.

Project Title: Educators' Perceptions of the Process and Implementation of a Multi-Tiered System of Supports (MTSS): A Case Study

Identification of investigators & Purpose of Study: You are being asked to participate in a research study conducted by Lyndsay Greene from James Madison University. The purpose of this research study is to gather information about educators' perceptions of the process and implementation of MTSS in North Carolina Public Schools. This study will contribute to the researcher's completion of her Educational Specialist's research project.

Research Procedures: You are being asked to participate in this study because you are an educator at Shiloh Elementary School. This study will take place during a monthly staff meeting at Shiloh Elementary. You will be asked to complete a survey of 17 items regarding your beliefs about student learning, problem solving, and expectations for instructional effectiveness, as well as 6 follow-up questions.

Time Required: Your participation is expected to take about 15 minutes.

Risks & Benefits: The study has no anticipated risks to participants outside the risks of everyday life. Though there are no anticipated direct benefits to participants, the study is expected to benefit Shiloh Elementary by providing information to guide future professional development and staff training opportunities.

Compensation: You will not receive any compensation for your participation in this study.

Voluntary Participation: Please understand that participation is completely voluntary. You have the right to refuse to participate and/or answer any question(s) for any reason, without penalty. You also have the right to withdraw from the research study at any time without penalty. If you want to withdraw from the study please tell the researcher. The researcher has the right to end subject participation if the individual is being disruptive to others or is not participating fully in this study.

Confidentiality: The results of this research will be presented at an end-of-the year staff meeting at Shiloh Elementary, James Madison University, and at a North Carolina state conference for school psychologists. The results of this project will be coded in such a way that the respondent's identity will not be attached to the final form of this study. The researcher retains the right to use and publish non-identifiable data. While individual responses are confidential, aggregate data will be presented representing averages or generalizations about the responses as a whole. Your individual privacy will be maintained throughout this study by Lyndsay Greene. In order to preserve the confidentiality of your responses, you will write your mother's maiden name in place of your own to link beginning of the year and end of the year surveys. Signed informed consent agreements and research data linking research data with subject names will be kept for three calendar in a locked cabinet located at Shiloh Elementary.

Whom to Contact with Questions: If you have any questions or would like additional information about this research, please contact the researcher, Lyndsay Greene, at green2lx@dukes.jmu.edu or Dr. Deborah Kipps-Vaughan at kippsvdx@jmu.edu. The James Madison University Institutional Review

Board (IRB) for Human Subjects Research has approved this project. You may contact the Dr. Taimi Castle, IRB Chair, at James Madison University at (540) 568-5929 or at castletl@jmu.edu with any questions or concerns related to this research study.

Giving of Consent: I understand the above information and have had all of my questions about participation in this research study answered. By signing below I voluntarily agree to participate in the research study described above and verify that I am an employee of Shiloh Elementary School in Union County, North Carolina.

Printed Name of Participant

Printed Name of Researcher

Signature of Participant

Signature of Researcher

You will receive a copy of this form for your records.

Appendix F

Discussion Group Email

Good afternoon,

As you may know, my name is Lyndsay Greene and I am currently serving Union County Public Schools as a graduate level school psychology intern under the supervision of Sara Ryan. I am currently in the process of completing a research project for fulfillment of my Educational Specialist Degree at James Madison University. For purposes of this project, I have decided to evaluate educators' perceptions of the Multi-tiered System of Supports (MTSS) initiative that North Carolina will begin in the upcoming academic year.

You are receiving this email because you participated in the initial phase of my research by completing the beliefs survey during the next upcoming staff meeting. As such, I would like to invite you to participate in two discussion groups to share your thoughts about MTSS with your colleagues. These discussion groups will occur following winter break in January-February 2019. Participation in these groups will occur on a regular school day and will take approximately 1.5 hours.

Please let me know if you are interested in participating or if you have any questions. Thank you for your consideration, I look forward to seeing you soon!

Appendix G

Discussion Group Oral Script

“Good afternoon everyone. Thank you for coming and participating in this discussion groups. During our time together, I will ask you all some questions regarding your beliefs about the MTSS process and how that fits into the culture here at Shiloh Elementary.

“A consent form will be read, signed, and handed in to the researcher before beginning your survey. You will also receive a copy of the consent form for your reference. By signing the consent form you are assuring the research staff that you are an employee of Shiloh Elementary School in Union County, NC. If you are not an employee at Shiloh Elementary, please discontinue your participation in this study at this time.

“Prior to beginning the discussion group discussion, you will be asked to write your mother’s maiden name and your birth month in place of your name on a sign-in sheet. This information will be used for matching purposes later in the study. During our time together, I will be taking notes about general information shared today; individuals’ names and specific comments will not be included in the notes. In addition to note taking, I will be audio recording today’s discussion to ensure that I do not miss anything. These audio recordings will be kept for three days before they are deleted. Upon finishing today’s discussion, I will thank you for your participation and you will leave with your copy of the informed consent.

“If you do not wish to be audio recorded or participate in the discussion group, but would still like to share your thoughts on MTSS, you may choose to complete a confidential, open-ended survey, thanked for your time and allowed to leave prior to the start of the discussion group with a copy of the informed consent.

“Your participation in this study is completely voluntary and if you do not wish to continue, you may leave at any time. Your comments will be anonymous and will only be used for the purposes of this research study. There is no compensation for participating in this study; again your participation is completely voluntary. My contact information can be found on your copy of the informed consent along with the contact information of my thesis committee chair, Dr. Deborah Kipps-Vaughan.”

Appendix H

Informed Consent Agreement

Please read this consent agreement carefully before you decide to participate in the research study.

Project Title: Educators' Perceptions of the Process and Implementation of a Multi-Tiered System of Supports (MTSS): A Case Study

Identification of investigators & Purpose of Study: You are being asked to participate in a research study conducted by Lyndsay Greene from James Madison University. The purpose of this research study is to gather information about educators' perceptions of the process and implementation of MTSS in North Carolina Public Schools. This study will contribute to the researcher's completion of her Educational Specialist's research project.

Research Procedures: You are being asked to participate in this study because you are an educator at Shiloh Elementary School. This study will take place at Shiloh Elementary, following the end of a regular school day. You will be asked to participate in a guided group to discuss your thoughts about MTSS. A confidential, open-ended survey will also be offered as an alternative to group discussion procedures.

Time Required: Your participation is expected to take about 1.5 hours.

Risks & Benefits: Anonymity of participants who choose to participate in group discussions will not be maintained within the groups (i.e. members will be openly conversing with one another). Additionally, you may share thoughts and feelings regarding MTSS with your colleagues that they may not have otherwise if they were not involved in today's group discussion.

Compensation: You will not receive any compensation for your participation in this study.

Voluntary Participation: Please understand that participation is completely voluntary. You have the right to refuse to participate and/or answer any question(s) for any reason, without penalty. You also have the right to withdraw from the research study at any time without penalty. If you want to withdraw from the study please tell the researcher. The researcher has the right to end subject participation if the individual is being disruptive to others or is not participating fully in this study.

Confidentiality: The results of this research will be presented at an end-of-the year staff meeting at Shiloh Elementary, James Madison University, and at a North Carolina state conference for school psychologists. The results of this project will be coded in such a way that the respondent's identity will not be attached to the final form of this study. The researcher retains the right to use and publish non-identifiable data. While individual responses are confidential, aggregate data will be presented representing averages or generalizations about the responses as a whole. Your individual privacy will be maintained throughout this study by Lyndsay Greene. If you choose to complete the open-ended survey in place of the discussion, you will write your mother's maiden name and your birth month in place of your own to link beginning of the year and end of the year surveys preserve the confidentiality of your responses. Signed informed consent agreements and research data linking research data with subject names will be kept for three calendar in a locked cabinet located at Shiloh Elementary.

Whom to Contact with Questions: If you have any questions or would like additional information about this research, please contact the researcher, Lyndsay Greene, at green2lx@dukes.jmu.edu or Dr. Deborah Kipps-Vaughan at kippsvdx@jmu.edu. The James Madison University Institutional Review Board (IRB) for Human Subjects Research has approved this project. You may contact the Dr. Taimi

Castle, IRB Chair, at James Madison University at (540) 568-5929 or at castletl@jmu.edu with any questions or concerns related to this research study.

Giving of Consent: I understand the above information and have had all of my questions about participation in this research study answered. By signing below I voluntarily agree to participate in the research study described above and verify that I am an employee of Shiloh Elementary School in Union County, North Carolina.

I give consent to be audio recorded during the group discussion. _____ (initials)

I do not give consent to be audio recorded during the group discussion. _____ (initials)

I do not give consent to be audio recorded during the group discussion, but would like to complete the confidential open-ended survey in place of the discussion. _____ (initials)

Printed Name of Participant

Printed Name of Researcher

Signature of Participant

Signature of Researcher

You will receive a copy of this form for your records.

Appendix I

Discussion Questions (Meeting #1)

What do you want support with as MTSS “rolls out” at Shiloh Elementary?

What aspects about MTSS are you hopeful for?

What about the MTSS roll-out process would you like to be different?

In an ideal world, what would a successful roll-out of MTSS look like at Shiloh Elementary?

What would it look like if Shiloh Elementary did not implement MTSS?

On a scale of 1-10, how prepared do you feel to implement MTSS in your classroom?

Why wasn't your answer lower?

What would it take to get your answer higher?

Appendix J

You have chosen to complete this open-ended survey in place of participating in a group discussion. Please type your answers to the following questions on a separate page (with your mother's maiden name and your birth month in place of your name) and return to Lyndsay Greene at your earliest convenience.

1. What do you want support with as MTSS "rolls out" at Shiloh Elementary?
2. What aspects about MTSS are you hopeful for?
3. What about the MTSS roll-out process would you like to be different?
4. In an ideal world, what would a successful roll-out of MTSS look like at Shiloh Elementary?
5. What would it look like if Shiloh Elementary did not implement MTSS?
6. On a scale of 1-10, how prepared do you feel to implement MTSS in your classroom?
 - a. Why wasn't your answer lower?
 - b. What would it take to get your answer higher?
7. How prepared do you believe Shiloh Elementary is to roll out the MTSS initiative?
8. How has the opportunity to discuss your thoughts surrounding the roll-out of MTSS with your colleagues helped you prepare for this change?
9. On a scale of 1-10, how prepared do you feel to implement MTSS in your classroom?
 - a. Why wasn't your answer lower?
 - b. What would it take to get your answer higher?

Mother's Maiden Name

Your Birth Month

Appendix K

Discussion Questions (Meeting #2)

How prepared do you believe Shiloh Elementary is to roll out the MTSS initiative?

How has the opportunity to discuss your thoughts surrounding the roll-out of MTSS with your colleagues helped you prepare for this change?

On a scale of 1-10, how prepared do you feel to implement MTSS in your classroom?

Why wasn't your answer lower?

What would it take to get your answer higher?

Appendix L

Good afternoon,

As you may know, my name is Lyndsay Greene and I have been serving Union County Public Schools as a graduate level school psychology intern under the supervision of Sara Ryan this year. I am currently in the final phases of completing a research project for fulfillment of my Educational Specialist Degree at James Madison University. For purposes of this project, I decided to evaluate educators' perceptions of the Multi-tiered System of Supports (MTSS) initiative that North Carolina will begin in the upcoming academic year.

You are receiving this email because you participated in the initial phase of my research by completing the North Carolina MTSS Beliefs Survey during last September's staff meeting. As such, I would like to invite you to participate in a short survey about your perceptions of MTSS during next month's staff meeting. Participation will take no longer than 15 minutes; more details will be provided prior to beginning the study.

Thank you for your consideration, I look forward to seeing you soon!