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A STUDY OF MIDDLE SCHOOL TEACHERS’ USE OF ASSESSMENT TEAM DATA FROM LEARNING DISABILITY EVALUATIONS

A Dissertation

Presented for the

Doctor of Education

Degree

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Carole Cavender Witt

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DEDICATION

This dissertation is dedicated to my family and my teachers. I would not be where I am, what I am, or who I am without their guidance, love, patience and understanding.
ACKNOWLEDGMENTS

No one accomplishes a project of this magnitude alone and I am certainly no exception. I owe a debt of gratitude to many individuals who contributed of their time and expertise in the furtherance of my research. Space does not permit me to mention all of them on this page but I am nevertheless most grateful to each and every one of them.

There are some individuals who I would especially like to thank in the space available to me. First and foremost, I would like to thank Dr. Sky Huck who chaired my committee and provided me with much needed guidance. He was unfailingly generous with his time, wisdom, and sense of humor. I could not have accomplished my research without his help. Dr. Katherine Greenberg has also been a great source of emotional support and encouragement throughout the dissertation process and indeed throughout my entire program of study. I am also grateful to Dr. Vince Anfara, Dr. Ralph Brockett, and Dr. Gary Klukken for serving on my committee and giving of their knowledge, patience and time.

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ABSTRACT

The purpose of this study was to examine teacher usage of assessment data from learning disability evaluations received in multidisciplinary team/individualized educational plan (MDT/IEP) meetings. Teacher perception of the helpfulness and usefulness of different types of assessment data, and the helpfulness of different types of data compared to each other were focuses of the study. Effects of teacher characteristics such as type of training received, amount of training received, and the amount of experience possessed on the level of teacher usage of assessment data were analyzed. Effects of teacher participation in referral procedures for students with suspected learning disabilities and participation in MDT/IEP meetings on the level of usage of assessment data were also analyzed. Study participants included 133 teachers and school psychologists currently employed in a middle school setting in the state of Tennessee. This study was primarily descriptive in design; statistical methods used were t-tests, ANOVAs, and the Spearman’s Rho correlation.

Results indicated that teachers found the assessment data they received in MDT/IEP meetings to be significantly helpful \((t = 10.797, p < .001)\) and useful \((t = 7.2, p < .001)\) in identifying students’ needs and designing instruction. There was a significant difference in teacher perception of the helpfulness of different types of assessment data in linking to instruction. While special education teachers found the types of data to be almost equally helpful \((F(4, 19) = 1.41, p = .965)\), results for regular education teachers indicated a significant difference for classroom observations \((F(4, 76) = 4.443, p = .003)\). Results also indicated a weak positive correlation between years of teaching experience and the level of
usage of assessment data ($r_s = .209, p = .029$). Finally, attendance at MDT/IEP meetings was shown to have a significant effect on the level of teacher usage of assessment data ($F (1, 82) = 7.704, p = .006$).

It was concluded that teachers and school psychologists should consider whether current assessment practices provide linkage to instruction when choosing assessment instruments and interpreting the data they produce. Implications for university training programs and directions for future research are discussed.
Assessment of students by teachers and other assessment specialists is performed everyday in schools across the country. Often such assessment is simply a task a student is expected to perform in order to receive a grade or a proficiency rating. At other times, assessment has as its purpose the goal of classifying or categorizing students. Recent developments in educational law have mandated that valid assessment methods should do more than rate or group students. Worthy assessment methods are supposed to produce information that helps to alter, improve and refine instruction for students. In other words, assessment should not be an end in itself, but an integral part of the learning cycle.

The following manuscript presents a review of the available literature examining multidisciplinary team functioning, types of data assessment teams have used to evaluate students and also presents the results of research examining teacher use of assessment data to inform their instructional practices.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>CHAPTER</th>
<th>CONTENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>INTRODUCTION</td>
</tr>
</tbody>
</table>

**Overview** | 1
**Statement of the Problem** | 1
**Summary** | 8
**Purpose of the Study** | 9
**Research Questions** | 9
**Definitions** | 10
**Limitations and Delimitations** | 11
**Significance of the Study** | 12

| CHAPTER II | REVIEW OF THE LITERATURE | 14 |

**Overview** | 14
**Multidisciplinary/IEP Teams in Special Education** | 14
**The Referral and Evaluation Processes of Multidisciplinary/IEP Teams** | 15
**Teachers’ Roles as Participants on Multidisciplinary/IEP Teams** | 16
**Assessment Information and Decision-making by Multidisciplinary/IEP Teams** | 18
**Learning Disabilities and Identification Procedures** | 22
**Assumptions Regarding the Discrepancy Model** | 23
**Traditional Assessment Procedures and Their Origins** | 24
**Criticisms of ATI and the Discrepancy Method** | 27
**A Paradigm Shift** | 28
**Support for Response-to-Intervention** | 30
**Alternative Assessment Methods** | 31
**The Use of Assessment Information by Regular and Special Education Teachers** | 34
**Synthesis of the Literature** | 38

| CHAPTER III | METHODS AND PROCEDURES | 41 |

**Overview** | 41
**Participants** | 41
**Research Design** | 42
**Procedures** | 42
**Instrumentation: Rationale for Using a Questionnaire** | 43
**Development of the Questionnaire** | 46
**Statistical Analysis** | 49
**Data and Procedures Used to Address the Research Questions** | 50

| CHAPTER IV | RESULTS | 55 |

**Description of Study Population** | 55
**Research Questions and Results** | 57
**Summary of the Results** | 66
LIST OF TABLES

Table 1. Description of Study Population by Licensure, Position, Education and Experience
Table 2. T-Tests for Means of Helpfulness and Usefulness of Assessment Data to Teachers
Table 3. Descriptive Statistics for All Teacher Rankings of Helpfulness of Assessment Data
Table 4. Descriptive Statistics for Special Education Teacher Rankings of Helpfulness
Table 5. Descriptive Statistics for Regular Education Teacher Rankings of Helpfulness
Table 6. Pairwise Comparisons (Paired T-Tests) for Regular Education Teachers’ Rankings
Table 7. Means for Usage between Highest Degree of Education Groups
Table 8. Spearman’s Rho Correlation between Level of Experience and Level of Usage
Table 9. ANOVA for Effects of Referral and Attendance on Usage
CHAPTER 1
INTRODUCTION

Overview

The focus of this study was on the usage of assessment data from learning disability evaluations by middle school teachers to inform their instructional practices. The need for the study, theoretical bases for the study, the problem statement, the research questions, limitations and delimitations of the study and pertinent definitions will be presented in this chapter.

Statement of the Problem

According to the most recent statistics, approximately 5% of the students in this country have learning difficulties that require intervention in the form of special education. This percentage equals approximately 3 million school children and there are estimated to be another 3 to 6 million who struggle academically without qualifying for special education services (Lerner, 2002). The Individuals with Disabilities Education Act (Public Law 94-142), hereafter referred to as IDEA, initially set forth the mandate that decisions regarding the eligibility, placement and programming for special education students be made by multidisciplinary teams (MDTs). This method was viewed as preferable to the previous practice that assigned the role of gatekeeper to special education services to the school psychologist or other selected assessment specialists. The use of MDTs was intended to prevent decisions being made by only one individual and to allow for input from multiple professionals as well as parents (Huebner & Gould, 1991).
In light of this change, Fagan and Wise (2000) advised school psychologists to be mindful that their efforts should be only one piece of the total picture of student assessment and intervention. They warned school psychologists that the school districts might disagree with their diagnosis based upon the multidisciplinary team’s assessment and comprehensive case review. Fagan and Wise further cautioned school psychologists to be aware of the dynamics, policies, and procedures of their school systems and to be conscious of the place of school psychology in that constellation.

Prasse and Schrag (1999) have identified the origin of the overemphasis on the role of the school psychologist in student assessment as the result of assessment for the purpose of categorization. They assert that the perceived need to label students with an eligible funding disability created the unintended result of testing in order to categorize and thereby determine eligibility for service. However, the reauthorizations of IDEA (1997) and the Individuals with Disabilities Education Improvement Act of 2004, hereafter referred to as IDEIA, call for assessment that is more outcome-oriented, functional and non-categorical in nature. In other words, the reauthorizations mandated test practices that have the purpose of testing to produce direct information that could be linked to instructional decisions and intervention design rather than testing for purposes of categorization and eligibility determination (Reschly & Tilly, 1999). Assessment reform is essential in order to produce information that is more pertinent to the purposes of effective design, implementation, and evaluation of educational interventions (Reschly, 2000).
The decision to implement the use of MDTs in schools was initially a controversial one. There has been much research published regarding the functioning of medical and social work MDTs. Research published regarding the functioning of school-based MDTs has identified numerous problems associated with their group process. Among those mentioned by Huebner and Gould (1991) are:

1. Inadequate parent involvement
2. The continued overemphasis on the role of the school psychologist resulting in less emphasis on information provided by regular educators leading to a reduction in teacher participation
3. Insufficient time devoted to discussing interventions and their design
4. Unsystematic approaches to decision-making
5. A lack of interdisciplinary collaboration and trust
6. A lack of clarity regarding team goals
7. A lack of attention to the emotional responses of parents

A survey of school psychologists by Huebner and Gould (1991) found that even the school psychologists themselves expressed concerns about insufficient time being devoted to the formulation of intervention plans. Ratings taken from the study’s participants suggested that MDTs needed to allocate more time and energy to developing interventions during team meetings as opposed to spending so much time discussing the assessment data and eligibility. Results from the survey also suggested a possible solution was for the team leader to employ agenda-setting procedures in order to more effectively manage the meeting time. It is notoriously difficult to pull all of the members
of MDTs together at the same time in the same place. Administrators have multiple demands, both expected and unexpected, for their presence during the school day. Parents have jobs and appointments, and pulling teachers from the classroom is never an easy prospect. Therefore, effective time management of the meeting is essential.

However, the quality, quantity and pertinence of the data presented at meetings can also have a great deal to do with the flow of the meeting. Data that are too technical for the non-assessment specialist members (laypersons) of the team may require lengthy explanations. Assessment data that do not inform instructional placement or design are possibly not pertinent to the purposes of MDTs and their presentation may unnecessarily consume the team’s time. Therefore, it might be as helpful to look at the type and quality of information presented to MDTs as well as strategies to process the information when assessing MDT time management.

A study by Merrell and Shinn (1990), who investigated critical variables in the learning disabilities identification process, raised some interesting questions regarding the usefulness of assessment data presented to MDTs. The school district that participated in the study had a discrepancy factor as a criterion in its eligibility guidelines. However, the majority of the students in the study who were classified as LD did not meet this criterion. Instead, the most critical variable in the classification of the students was a low level of academic achievement. Merrell and Shinn stated that this finding was consistent with the conclusions of previous research (Ysseldyke & Algozzine, 1983) that found discrepancy formulas have often been applied in erratic and inconsistent manners.
Merrell and Shinn (1990) concluded that the results of their study led them to question why the data gathered from the time-consuming and costly psychoeducational testing process seemed to carry so little weight in the final decision regarding a student’s special education eligibility and subsequent classification. The authors questioned the level of usefulness teachers find in such data and what reasons might underlie findings of dissatisfaction with such assessment data. The authors offer the possible reasons of poor linkage of assessment to instructional practices and interventions as well as a focus of the data on within-child characteristics rather than a focus on academic and/or environmental variables.

The latter reason was noted as an issue in a study by Knotek (2003). Knotek reported that less than half of the student participants referred to the school psychologist by MDTs were ultimately found to be eligible for special education services. Knotek noted that the MDTs in his study focused heavily on problem verification procedures suggesting that the MDTs were more engaged in problem verification than problem solving. This may be due to the focus of many MDTs on determining eligibility for services, since the focus of problem-solving models is on the improvement of student performance as opposed to the classification of a disability (Canter, 2006).

Why, then, deviate from focusing on cognitive-based assessments as the source of information on which to base educational decisions about a student suspected of having learning disabilities? The 2004 reauthorization of IDEIA does not demand an either/or choice between the use of standardized measures of cognitive ability and response to intervention procedures (the systematic testing of a student’s response to changes in
instruction). Instead, Canter (2006) says, the newest reauthorization reiterates the call for relevant and comprehensive evaluations. Such evaluations must shift from norm-referenced models that are dominated by psychometrics to problem-solving models that have an edumetric focus that measures changes in student performance. The accomplishment of such a shift, in Canter’s opinion, will require a conceptual shift as well as a methodological one. The concept of a “within child” deficit must shift toward an environmental/behavioral conceptualization where pre-referral intervention and result monitoring are routine and documented prior to a special education referral.

Canter (2006) reported at least two positive outcomes from such a paradigm shift:

1. The use of multiple sources of data in student assessment helped to minimize the impact of bias found in standardized, norm-referenced measures.

2. The use of problem-solving and response to intervention models meant that a student’s learning problems are addressed at the stages of prevention, or at least early intervention, rather than waiting until special education referral, evaluation, and instruction become necessary.

Canter (2006) concluded that the accomplishment of this kind of paradigm shift will necessitate changes in how students are identified for intervention, the selection of interventions and their implementation, and the monitoring and evaluation of student progress. Fuchs and Vaughn (2006) assert that the use of the IQ-achievement discrepancy formula to identify learning disabilities (LD) involves problems of measurement and conceptualization. They say that this is because there are few cognitive
characteristics that differentiate between poor readers who have an IQ achievement discrepancy and those that do not. Also, they say that since the degree of discrepancy from IQ often does not correlate with the severity of the LD, the discrepancy score is therefore, unreliable. Fuchs and Vaughn propose a standard of Failure to Respond to Intervention as a superior criterion for the identification of LD.

Response-to-intervention measures (hereafter referred to as RTI) involve the systematic testing of classroom adaptations that increase the student’s chance of being able to respond to instruction in the regular education setting. If the applied interventions fail to yield satisfactory levels of student progress, the student is then considered for special education services to supplement regular education measures. Fuchs and Vaughn believe that using RTI to identify students with learning disabilities maintains the focus of assessment on the student’s learning by monitoring student progress and the response to instructional interventions. Conversely, they say the discrepancy approach produces test scores that make no significant contribution to effective instructional design.

The idea of linkage of assessment to intervention as an essential feature of effective student assessment therefore has support in both the literature and the law. However, early studies from the Institute for Research on Learning Disabilities (IRLD) showed a consistent tendency of professionals to ignore or refute assessment data in their decision-making regarding students (Epps, Ysseldyke, & McGue, 1984; Foster, Ysseldyke, Casey, & Thurlow, 1984; Ysseldyke & Algozzine, 1983; Ysseldyke, Christenson, Pianta, & Algozzine, 1982).
Summary

The focus of this study is on middle school teacher use of assessment data from learning disability evaluations and whether or not teachers can use such data to inform instruction. Multidisciplinary teams are mandated by IDEA (1997) and IDEIA (2005) to consider assessment information that is more pertinent to the purpose of effective design, implementation, and evaluation of educational intervention. IDEA and its subsequent reauthorizations call for assessment that is outcome-oriented, functional, and non-categorical in nature (Reschly & Tilly, 1999).

The No Child Left Behind Act of 2001 is another example of a federal law that directs schools to provide scientifically based instruction and intervention while also holding schools accountable for the progress of all students in terms of meeting grade level standards (Klotz & Canter, 2006). With such support in the law for considering information in decision-making that goes beyond the products of traditional psychoeducational assessments, a consideration of teacher satisfaction with the usefulness of different kinds of assessment data seems to be in order.

Regular and special education teachers are in a unique position to evaluate the effectiveness of different kinds of assessment data to inform instructional and intervention design because of their roles in implementation and monitoring. Both regular and special education teachers are integral members of MDTs and are often represented by more than one member on MDTs. Therefore, an understanding of teacher usage of assessment data might provide a practical view of which kinds of assessment data truly provide linkage to the instruction of those students evaluated. It is also
important to understand if teachers feel they are adequately prepared to use assessment data in their instructional practices or if lack of teacher preparation leads to fear or unwillingness to do so. Therefore, an examination of the characteristics of those teachers who do report using assessment results in their instructional practices might be helpful.

**Purpose of the Study**

The purpose of this study was to explore the views of a sampling of middle school regular and special education teachers and their school psychologists from a Southeastern state with regard to the usefulness of the assessment data they receive in multidisciplinary team settings to inform instructional practices. For the purpose of this study, the definition of a middle school is limited to those schools containing only sixth, seventh and eighth grades.

**Research Questions**

1. Do middle school teachers find the assessment data they receive in MDT/IEP meetings useful in designing instruction?

2. Are specific types of assessment data perceived as more useful than others in the linkage of assessment to instruction, and if so, which ones?

3. Is teacher usage of assessment data in their instructional practices related to the teacher characteristics of experience, licensure, and/or training? For the purpose of this study experienced teachers will be defined as those with more than three years of experience. Licensure is defined as certification by the state at their current position. Training is defined as having received
instruction in a regular or special education teacher preparation program and also the highest degree attained.

4. Is teacher participation in pre-referral and referral procedures and MDT/IEP assessment teams related to their use of assessment results?

Definitions

The following are terms that are used frequently throughout the study and may often be abbreviated. They are defined as follows with their working abbreviations:

Multidisciplinary Teams (MDTs): MDTs are teams composed of multiple professionals, parents, and possibly the student that make decisions regarding eligibility, placement, and programming for special education students. The terms M-Team, IEP Team, and MDT may be used interchangeably. S-Teams are generally pre-referral teams (pre-referral meaning to special education). They are usually composed of the student’s regular education teachers, the school psychologist, the school counselor and a special education teacher. Their purpose is to make sure that all possible regular education interventions have been tried before making a special education referral. The terms S-Team, SST, and student support team may be used interchangeably (Huebner & Gould, 1991).

Learning Disabled (LD): Those who have a disorder in one or more of the basic psychological processes involved in understanding or in using language or mathematical calculations and are not the result of visual, hearing, or motor handicaps, mental retardation, emotional disturbance, or of environmental, cultural or economic disadvantage (Ysseldyke & Marston, 1999)
Response to Intervention (RTI): Refers to a process that emphasizes how well a student responds to changes in instruction. The essential elements of RTI are: the provision of scientific, research-based instruction and interventions combined with the monitoring and measurement of student progress in response to the instruction and interventions, and the use of these measures to shape instruction and make educational decisions (Klotz & Canter, 2006).

Individuals with Disabilities Education Act (IDEA) or the Individuals with Disabilities Education Improvement Act (IDEIA 2004) Federal law that guarantees a free and appropriate education to students who meet the two-pronged criteria of having one of the 13 disabilities recognized in the act and requiring special education and/or related services in order to receive an education (Reschly & Tilly, 1999).

No Child Left Behind Act (NCLB): Federal program that requires highly qualified teachers to deliver a well-planned curriculum using evidence-based instructional methods. Accountability measures are required to monitor whether all children are making adequate progress. Those not making adequate progress will be detected early and provided with supplemental, evidence-based instructional procedures to improve performance (Ardoin et al., 2004).

Limitations and Delimitations

This study has several limitations. First, the tool being used to gather information is a self-report survey, which may lessen the ability to generalize the findings to a broader population. Also, the selection of participants is not totally random. This may be due to the respondents being only those people who were willing to take the survey.
Participants received an invitation to voluntarily participate in the study through an e-mail voluntarily distributed by their principal. Another factor affecting the randomness of the sample may have been the willingness of the superintendents and the principals to distribute the survey.

Delimitations of this study include the researcher’s decisions to limit the study to middle schools in the state of Tennessee, to limit the definition of a middle school to those schools containing 6th, 7th and 8th grades exclusively, and to limit those middle schools represented in the study to those with established e-mail systems in order to increase the flow of information and the level of participation (response rates) in the study.

Significance of the Study

Studies have been conducted regarding MDT process (Amedore & Knoff, 1993; Dobson, 2000; Pfeiffer & Naglieri, 1983) and there have also been studies that examined teacher satisfaction with regard to their roles on MDTs (Conner, 1999; Duffy, 1983). Studies have also been conducted to assess teacher compliance and the implementation of intervention plans (Conway, 1997; Kuralt, 1990; Ogletree, Bull, Drew, & Lunnen, 2001; Roby, 1994; Telzrow, McNamara, & Hollinger, 2000). This researcher could not find, however, any previous studies examining teacher satisfaction with the assessment data they received, their preference or lack thereof for specific kinds of data, and their belief in the usefulness of different types of assessment to inform instruction.

The lack of available research within the last two years may be due to the relative newness of the legal mandates of IDEIA (2004) and NCLB (2001) for linking assessment
to instruction. These mandates are practical as well as legal. After all, why subject a student to assessment procedures if the data produced are not useful? Since teachers are the individuals most responsible for instructional design and the implementation and monitoring of that design, it would seem that their satisfaction and confidence in the assessment data they receive would be critical factors in their use to inform instruction. The researcher hopes that this study will add to the knowledge base an understanding of the current status of teacher usage of assessment results, an understanding of teacher preference for certain types of assessment data over others, and the characteristics of teachers who do report using assessment results in their instructional practices.

In this chapter the researcher has established the need for the study, presented the problem statement, discussed the limitations and delimitations of the study, and provided definitions of some of the pertinent terms. In the next chapter, a review of the literature will provide additional background information.
CHAPTER II
REVIEW OF THE LITERATURE

Overview

This chapter includes a review of the literature that is relevant to the present study. The review is organized around the following concepts: multidisciplinary and individualized educational plan teams, the referral and evaluation processes, teacher roles on MDT/IEP teams, LD identification procedures, traditional assessment procedures, alternative assessment procedures, and the paradigm shift towards the linkage of assessment to instruction. Research findings of pertinent studies are also summarized in this chapter.

Multidisciplinary/IEP Teams in Special Education

Multidisciplinary teams (MDTs) are the body charged by IDEA with the responsibility of evaluating students, and determining their eligibility for special education services. When the MDT determines that a student requires services, the team then develops an Individual Education Plan (IEP) for the student containing educational goals designed specifically for the individual. The MDT is also charged with the responsibility of periodically reviewing the student’s case and evaluating progress toward the stated goals, determining whether or not any new goals should be developed and determining if the need for special services continues to exist. MDTs are most commonly composed of the following professionals: the principal, the title one learning specialist, the speech/language pathologist, special and regular education teachers, the school psychologist, the school counselor, and perhaps the attending physician or a
nurse. In addition to the aforementioned professionals, the parents and sometimes even the student in question are members of the MDT (McMains, 2002).

**The Referral and Evaluation Processes of Multidisciplinary/IEP Teams**

MDTs evaluate individuals for many different categories served by special education but for the purpose of this study, the focus will be on the category of learning disabled students, also identified as specific learning disabilities (SLD). A specific learning disability, as defined by the Individuals with Disabilities Education Act (IDEA), is a severe discrepancy between intellectual ability and achievement that is in one or more of the following areas: oral expression, written expression, reading comprehension, mathematics reasoning, listening comprehension, basic reading skills and mathematics calculation.

A disability is said to exist when it is determined that the discrepancy is not the result of vision or hearing problems, mental retardation, and environmental, educational or cultural deprivation and the identified discrepancy cannot be corrected without the help of special education (McMains, 2002). MDT’s were mandated in order to protect against inappropriate referrals to special education as well as to reduce discriminatory referrals and placements of students into special education. The rationale for this mandate was that input from a variety of professionals would ultimately produce decisions of lesser bias than the input of one individual assuming the role of the gatekeeper to special education services (Knotek, 2003).

An offshoot of the MDT, the pre-referral team (also known as a student study team, a student support team or simply as an “S” team), arose from the legal stipulation
that appropriate interventions must be implemented in the regular education classroom for a reasonable period of time before a student could be referred to special education for evaluation and eligibility determination. The referral process from teacher to “S” team to MDT generally follows an accepted pattern. First, the teacher notes a student falling two or more grade levels behind in school or simply failing to work up to his or her potential. The teacher then makes the initial referral to the “S” team. Next, the “S” team using a problem-solving process discusses the student’s functioning and suggests appropriate interventions. Finally, if the interventions work, the student remains in regular education with normal classroom support. If the interventions fail to produce student progress, the student is referred on to special education assessment services. Therefore, a special education referral should occur only after all options available in the regular education environment have been exhausted (Knotek, 2003).

Teachers’ Roles as Participants on Multidisciplinary/IEP Teams

Obviously, the teacher plays a major role in the referral process and their perceptions of the student during this process may have a great deal to do with their level of satisfaction with the assessment data they receive as members of MDTs. In a study by Knotek (2003), the issue of referral bias by teachers in their special education referrals was examined. Knotek stated that teachers’ initial referrals set in motion a process that almost always leads to a student’s certification for special education services. He contended that the act of referral itself, rather than any deliberations that might occur in the MDT is the critical factor leading to a special education placement. Teacher referrals
to special education, according to Knotek, are often examples of *confirmation bias* because teachers introduce their subjective opinions in their referrals to the MDT where they are often accepted by MDTs that are usually dominated by their colleagues.

Knotek concluded that the bias introduced in a referral is often inadequately examined, if it is even noted at all, and that teacher opinion is usually “rubber-stamped” by the MDT. The issue of referral bias may present one explanation for the tendency of professionals to ignore or refute assessment data in their decision-making regarding students. Early studies from the Institute for Research on Learning Disabilities (IRLD) examined this behavior (Epps, Ysseldyke, & McGue, 1984; Foster, Ysseldyke, Casey, & Thurlow, 1984; Ysseldyke & Algozzine, 1983; Ysseldyke, Christenson, Pianta, & Algozzine, 1983).

Bocian, Beebe, MacMillan, and Gresham (1999) reported on studies of a more recent vintage that confirmed a lack of relationship between assessment data and the subsequent diagnostic approaches and placement decisions. The authors of one study (Burns, Tilly, Gresham, Telzrow, Shapiro, & Kovaleski, 2006) cited cognitive dissonance as a factor in the lack of consistency in the linkage of assessment to intervention. Festinger (1957) defined cognitive dissonance as the tendency of a person to resist new information that is inconsistent with what is already known. The presence of referral bias may set the stage for cognitive dissonance when MDTs are presented with assessment data that do not confirm those opinions already in place. Furthermore, Shinn, Good, and Parker (1999) found that when an MDT has difficulty determining the type, or even the presence of a disability, it may choose to ignore the assessment data and override the
diagnostic criteria, in the face of severe achievement deficits.

*Assessment Information and Decision-making by Multidisciplinary/IEP Teams*

As early as 1983, a study by Fleming and Fleming observed that multidisciplinary team decision-making could be affected by factors such as confusion over placement, team goals and duties, interpersonal rivalries, and individual biases or beliefs instead of objective data. Fleming and Fleming noted that the inadequate presentation of the results of a student’s evaluation coupled with a lack of productive discussion regarding the results constituted one of the main problems impeding the efficiency of MDT functioning. In their study, the introduction of a problem-solving format had a positive effect on team functioning. Perez (2001) and Schwanz and Barbour (2005) studied the problem-solving process in teams and found that the problem-solving format has many variations, but all retain three basic components: identifying concerns about a student, identifying possible interventions to remedy those concerns, and monitoring and evaluating the effectiveness of those interventions. Perez also found that problem-solving was enhanced in school-based support teams with training in decision-making strategies and team building.

In a related study by Conner (1999), the satisfaction of participants in MDT’s with their role and their participation in the decision-making process was examined. Conner found that there was a wide range in the level of participation by the classroom teachers on the team compared to other role groups (psychologists, administrators, etc.). The results of Conner’s study indicated that both the roles individuals served in MDT meetings and the level of participation were related to their reported levels of satisfaction.
Conversely, Conner found that the satisfaction levels of participants were not related to MDT confirmation of a student’s disability.

Role satisfaction and MDT participation with school psychologists were studied by Roby (1994) in a statewide survey of practicing school psychologists in Pennsylvania. Roby (1994) reported seven variables predictive of psychologist satisfaction with team participation. A key variable found to affect the psychologists’ job satisfaction with regard to team participation was the involvement of a regular education teacher in carrying out the M-team’s recommendations. As in Connor’s study, Roby also found that team members being trained in team process positively affected the psychologists’ satisfaction with their participation in teams and was conducive to better decision-making.

There have been conflicting results from studies regarding the value of team decision-making versus individual decision-making. Fisk (1995) reported results from his research that indicated the collective decision-making of teams is a more productive process than individual decision-making. Among the benefits cited in this study are: the emergence of more diverse and new ideas, increased professional learning and growth, and increased cohesiveness among team members. However, research by Aspel (1995) that compared individual and MDT decision-making with regard to placement decisions of students found that teams were as likely as individuals to use irrelevant or illusory information in their placement decisions. Aspel also reported that teams were just as likely as individuals to fail to use relevant information (such as base rates and response to intervention) in the formation of their diagnostic recommendations and placement
Merrill (1991) explored the accuracy of decision-making by MDTs. The difference in the outcomes of the MDTs’ decisions and team satisfaction with those decisions was investigated when three factors (levels of participation, degree of clinical judgment, and students’ behavioral ratings) were varied. Results of this study indicated that level of participation was the most important predictor for perceived accuracy of and satisfaction with MDT decisions. Teachers were apt to give more weight to clinical judgment than the clinicians and the student behavioral ratings measure yielded no significant effect. However, another interesting result reported was the significant difference in perception of the accuracy of MDT decisions and the agreement upon completion of the follow-up survey between regular education and special education teachers. Merrill concluded that collaboration and consensus decision-making practices produce increased participation by MDT members. This, in turn, leads to an increase in the perception that the decisions being made are accurate ones.

Results of a 1991 study by Delvin also indicated that effective team communication and consensual agreement were critical factors in MDT success. Belief in team collegiality and commitment to team problem solving were also found to be critical factors in successful teams. Successful team operation was defined in this study by special education referral and placement rates. The study found that where the operational factors were in place, the teams made more appropriate referrals to special education resulting in higher rates of eligibility and special education placement.

Team member satisfaction was also a focus of a study by Kelley (1991) that
examined the decision-making process of MDTs during special education annual reviews. Results of the study indicated greater team member satisfaction was dependent upon discussion of the previous IEP and adequate time provided for such discussion. Apparently, there was also greater team satisfaction when the chairperson of the MDT was not a school psychologist.

Zemba (1985) conducted a study of factors that influenced decision-making by teams making initial special education placements. The perceptions of principals, regular education teachers and special education teachers were surveyed from seventeen sub-districts in the Chicago Public School System. Findings of the study indicated that the perceptions of special education teachers with regard to the impact of the psychologists’ influence on decision-making differed from those of principals and regular education teachers. The variable cited as being most explicative of the impact on perceived influence was that of the climate surrounding the staffing. Zemba also found that the use of emotionally charged words was perceived by principals and special education teachers as having had the most influence on placement decisions.

Other earlier studies (Duffy, 1983; Shapiro, 1982; Zebrowski, 1984) examined the satisfaction of MDT members, their level of participation, and participant role as factors in team functioning and decision-making. MDT participant roles/member roles are dictated by law (IDEIA: Section 614, part B). All MDTs must have at least the following positions represented: (1) the local education authority (LEA) – this is the principal or the principal’s designee (usually an assistant principal or the school counselor); (2) the interpreter of results – usually the school psychologist or assessment specialist who
interprets for the team the scores obtained from the evaluation process; (3) the parent/guardian; (4) a regular education teacher and (5) a special education teacher. Findings in all three of the afore-mentioned studies indicated that members’ roles affected their participation in team process and that in turn affected their satisfaction level. However, none of the three studies was able to find a relationship between the professional training and experience of team members and their functioning in team process.

Learning Disabilities and Identification Procedures

Since the inception of IDEA, the category of learning disabled has become the largest of the special education services categories (Merrell & Shinn, 1990). Klotz, Feinberg and Nealis (2004) verified that this is still the case and state that according to the most recent report to Congress regarding the implementation of IDEA, students with learning disabilities currently constitute half of those served by special education and approximately 5% of the total school population. This reflects a 28% increase in the LD population since Merrell and Shinn’s 1990 report. Consequently, the validity and reliability of current LD identification procedures has come into question.

The over-identification and misidentification of students in the LD or SLD (specific learning disability) category has become one focus of the current U.S. Government and Congressional leaders in an effort to reduce the costs of special education services. One recommendation that emerged from the President’s Commission on Excellence in Special Education (2002) was to remove the IQ-achievement discrepancy requirement from the LD determination process. Findings from the
Commission’s report indicated that reliance on the discrepancy formula was an outdated and unsatisfactory method that required a student to fail before help was provided. The Commission recommended methods of identification that focused on early identification prevention and intervention. The commissioners clearly opposed what they saw as an over-reliance on IQ tests and questioned their validity when used to identify students with learning disabilities.

Assumptions Regarding the Discrepancy Model

Questions regarding the use of the discrepancy model in the identification of students with learning disabilities began to surface in the early 1980's. The Institute for Research on Learning Disabilities (IRLD) at the University of Minnesota contributed greatly to the research in this area. One of its findings was that of a 96% overlap in the psychometric characteristics of a school-identified sample of learning disabled students with a sample of low achieving non-referred students (Ysseldyke, Algozzine, Shinn & McGue, 1982).

This finding refuted one of the fundamental assumptions underlying the use of IQ tests in the identification of LD students: the universality and specificity of deficit characteristics. Basically, this assumption states that the cause of a disability is presumed to be a within-child deficit or dysfunction. Furthermore, it is assumed that low academic performance is a symptom of this internal condition. Since the primary purpose of traditional assessment is categorization, it is also assumed that all students possessing the same condition must have at least one universal trait or characteristic in common (universality) and that there are one or more traits or characteristics that are specific to
the condition (specificity). However, there has been serious debate about whether or not there are reliable and valid psychometric differences among disability categories as evidenced by the IRLD findings (Ysseldyke & Marston, 1999). Most special education eligibility determinations are based on this kind of traditional, categorical model of assessment. The primary purpose of such is eligibility determinations for special education service delivery rather than informing interventions (Gresham & Noell, 1999).

Traditional Assessment Procedures and Their Origins

The diagnostic criteria for many of the special education service categories have (until the most recent IDEIA 2004 authorization) dictated the administration of norm-referenced, standardized tests. However, in addition to questionable psychometric reliability and validity, such tests have other limitations. Reschly and Tilly (1999) state that the information such tests produce is of little use in intervention and instructional design or evaluating the effectiveness of educational programs. They recommend changing the categorical designations of students with disabilities and using a non-categorical system with functional operational criteria as a possible remedy.

The traditional psychoeducational evaluation to determine SLD eligibility almost always consists of an individually administered IQ test combined with an individually administered, standardized achievement test. The rationale for this method of evaluation comes from the Aptitude-by-Treatment Interaction (ATI) model by Cronbach, which formed the basis for traditional special education particularly in relation to learning disabilities. Cronbach, in 1957, hypothesized that there were two traditional disciplines in the social sciences such as education: correlational discipline and experimental
Correlational discipline entailed the assessment of the natural variations among people that were then related to their actual performance. If correlations were found between the natural variations and performance, the ATI model assumes that increased efficiency in the use of educational resources can produce improved performance. The correlational discipline accomplishes this by placing students in different settings or programs commensurate with their aptitudes and abilities (Reschly & Tilly, 1999).

In contrast, the experimental discipline’s aim is to produce increased levels of performance by divining the most effective interventions and then implementing the best of them. For Cronbach, ATI was a method by which the correlational and experimental disciplines could be used to the benefit of human welfare. The ATI approach consisted of studying the differences in treatments, the differences in people’s aptitudes, and the interaction between those aptitudes and treatments.

Historically, the application of the ATI model in special education has focused more on the correlational discipline. This can be seen in the traditional method of placement for service delivery. Referred students are assessed to see if they meet classification criteria established for the disabled category. Those students who obtain low scores on measures of IQ and academic achievement or who exhibit large discrepancies between the two are placed in different educational programs. The rationale for the differential placement is that it allows students to benefit from a placement that is appropriate for their aptitudes where the regular education program cannot be as accommodating. On the other hand, the more recent use of single subject
designs and the increasing use of behavioral interventions are examples of the shift towards the application of the experimental discipline (Reschly & Tilly, 1999).

In applying the ATI model to special education, teaching methodology needs to match the learning style, cognitive abilities and temperament of the student. The ATI model is predicated on the assumption that different teaching methods are appropriate for students in the different categories of disabilities. The categorization of services was a response to the failure of many students to progress in the regular education program. Categorization of services is based on the previously mentioned assumption that students could be identified in a valid and reliable way by testing because there are psychometric differences between students who exhibit a condition and those who do not. These assumptions are the basis of the theory behind aptitude-times-treatment interactions or A x T (Ysseldyke & Marston, 1999).

Ultimately, the aptitude-by-treatment interaction model Cronbach developed in 1957 as a basis for applied work in education and psychology was abandoned by him in 1975. Cronbach and his colleagues conducted many studies between 1957 and 1975 in an effort to identify interactions between aptitudes and instructional methods. However, the interactions hypothesized by Cronbach either did not occur at all or were extremely weak. In 1975, Cronbach, himself, proposed to replace ATI with a strategy that used context-specific evaluation and short-run control that had empirical validity (Reschly & Tilly, 1999).
Criticisms of ATI and the Discrepancy Method

Despite Cronbach’s abandonment of ATI, Peterson and Shinn observed in 2002, that the identification of learning disabled students was still most commonly based on the subtraction of a student’s score on an achievement measure from the student’s obtained score on an ability measure (i.e., an IQ test). The rationale for this method is based upon the theory that learning disabilities are within the student or an Intra-Individual Achievement Discrepancy (IAD). The concept of IAD has been criticized as being based upon severe low achievement alone or more accurately described as Absolute Achievement Discrepancy (AAD). Peterson and Shinn suggest a more appropriate alternative would be a measure based on a severe achievement discrepancy from a local achievement standard or Relative Achievement Discrepancy (RAD).

Reschly (2000) observed the practice of utilizing the discrepancy method (IAD) to determine specific learning disabilities (SLDs) has been harshly criticized by personnel associated with federally funded disability research centers. The criticisms most often leveled at IAD are: (1) IQ-achievement discrepant readers do not differ from non-discrepant poor readers in terms of the instructional interventions they require nor in their responsiveness to those interventions and (2) the use of the discrepancy formula criterion often means that identification and any subsequent treatment are delayed until the third or fourth grade. Reschly asserts that many of the students who are later identified as SLD in reading could have been accurately identified as early as in kindergarten with the use of phonological awareness measures and that delays in treatment have adverse affects on students such as allowing reading problems to worsen and increased frustration with
school in general.

The recurring themes in the literature are of accountability with regard to assessment that more accurately assesses students’ needs and of interventions that are empirically validated and focus on students’ responses to instruction. These themes are in sharp contrast to the traditional methods previously discussed that currently inform the categorical eligibility determination models (Daly & McCurdy, 2002).

Shinn and McConnell (1994) criticize traditional assessment measures for their lack of usefulness in the evaluation of specific instructional strategies’ efficacy in the remediation of learning deficits. The authors attribute this failure to the assessment measures’ limitations with regard to content validity, inadequate response formula, and lack of attention to process assessment and error analysis. Abbott, Reed, Abbott, and Berninger (1997) also addressed the lack of helpfulness of standardized test scores when it comes to generating instructional interventions. They suggest that a combination of standardized tests, error analysis and clinical interviews may be a more effective method of generating instructional interventions for students with learning disabilities.

A Paradigm Shift

The current literature supports a shift towards assessment procedures that inform instructional strategies by direct diagnosis and away from an inferential one. The paradigm shift, away from assessment practices with a psychometric orientation and towards those with an edumetric focus, has been noted by Reschly and Tilly (1999). They assert that psychometric techniques for differentiating between groups are unreliable. Therefore, assessment methods whose purpose is categorization are not useful for
informing instruction. Reschly (2004) later credited the success of behavioral interventions as one of the first developments to challenge the traditional “refer-test-place” model that still dominates current assessment practice in special education. Reschly identifies the problems with current assessment practice as: (1) an absence of accountability for the results; (2) a focus on categorization for service delivery as opposed to student outcomes; (3) the use of programs and interventions that are largely ineffective; and (4) the disconnect between the knowledge regarding effective instructional and behavioral change principals and what is implemented in actual practice.

Reschly (2004) noted that a paradigm shift was inevitable because of the problems with traditional assessment practices, and so the foundation for change was laid. Other authors joined the movement towards system reform. Dawson, Summing, Harrison, Short, Courin, and Palomares (2004) reported on the call for reduced emphasis on traditional assessment practices and a greater emphasis on assessment linked to intervention and accountability. In a personal interview with Reschly (November 22, 2004), the author predicted that the accomplishment of system reform would face several difficulties. Reschly identified time, lack of training (for both teachers and school psychologists), and a lack of system support as the main barriers to the adoption of alternative assessment measures that focus on response to intervention (RTI) as opposed to traditional psychometrics.
Support for Response-to-Intervention

Support for RTI can be found in the reauthorization of IDEIA (December 3, 2004, Public Law No: 108-446) that added new language allowing local education agencies (LEAs) to eliminate the IQ - Achievement discrepancy requirement. The reauthorization of IDEIA (2004) states, “for purposes of determination, LEAs may use a process that determines if the child responds to scientific, research-based intervention as a part of the evaluation procedures described in Section 614 (a)(2) & (3).” While the bill allows LEAs to continue the use of the discrepancy model, the hope is expressed that local education agencies will not rely on it solely and instead will use it as just a part of the larger picture of the child’s abilities (Klotz & Nealis, 2005). This provision changes the criteria for special education placement from one with a statistical basis to one with a more functional basis.

Ehrhardt-Padgett, Hatzichristou, Kitson, and Myers (2004) advocated the use of assessment methods by school psychologists that expand the linkage between assessment and intervention and incorporate intervention in their practices. Reschly (2002) observed that the current assessments typically used in an evaluation by school psychologists, neither prompt nor support the use of principles related to the production of positive outcomes. According to the current literature, the traditional assessment measures that are the backbone of a psychoeducational evaluation are not designed to inform or evaluate the instructional strategies used in the remediation of learning deficits. The limitation of these measures are due to issues of content validity, inadequate response formats and an inadequate number of items distributed across a broad enough range to
give an accurate picture (Shinn & McConnell, 1994).

Alternative Assessment Methods:

Curriculum Based Measurement

What are the alternatives to traditional static measures of assessment and how are they superior to traditional methods? Shinn (1989) advocates the use of Curriculum-Based Measurement (CBM) over traditional assessment measures because of its practical approach that targets the remediation of any significant performance discrepancy. Shinn also notes CBM’s cost effectiveness because it does not require extended testing to search for any presumed cause of the discrepancy.

Shinn (1989) defines CBM as a set of specific measurement procedures that can be applied to quantify student performance in reading, writing, written expression, spelling and arithmetic. CBM is but one model of Curriculum-Based Assessment (CBA). There are a wide variety of assessment strategies that utilize curriculum materials for testing. The defining characteristic of all CBA models is a set of measurement procedures that includes direct observation and recordings of a student’s performance in the local curriculum for the purpose of gathering data with which instructional decisions can be made.

CBA can be an effective means of linking assessment to intervention since CBA strategies provide important information for use in planning instruction. However, CBA models can be a means of linking assessment data to intervention planning and can also be useful in linking intervention to an evaluation of its outcomes. According to Shinn (1989), without ongoing assessment of student progress, there is the risk of continuing
ineffective instructional programs no matter how high the quality of the assessment data.

The limitations of CBA include: (1) the requirements of time and effort needed to administer CBA models, to implement interventions, monitor treatment fidelity, and (2) the need for frequent assessment of student progress (Walker, 2004). Fuchs and Fuchs (1989) assert that successful implementation of CBA requires a strong support system to facilitate accurate implementation and a substantial time commitment. They recommend the use of computer applications to help with the time-consuming process of CBA models.

A study by Duhon, Noell, Witt, Freeland, Dufrene, and Gilbertson (2004) demonstrated encouraging results for students when the brief assessments incorporated into CBA were used to identify instructional needs and select appropriate interventions. The researchers in this study asserted that the poor link between assessment and intervention is due to assessment results that often identify the need for intervention but are often not helpful in identifying the appropriate intervention(s) thus reducing intervention planning to a trial and error process.

*Dynamic Assessment*

Advocates of Dynamic Assessment often express the same dissatisfaction with the information provided by IQ scores and other traditional assessment methods as do advocates of CBA. They argue that IQ scores fail to provide information that is relevant to the instruction of children and that IQ scores also fail to provide information regarding intervention strategies that are appropriate for children’s varying cognitive abilities. Dynamic Assessment goes beyond static assessment methods that often stop at the
confirmation of what most teachers already recognize – that a learning problem exists. Dynamic Assessment methods go further and help identify effective teaching interventions to remedy the identified problem (Abbott et al., 1997).

Dynamic Assessment, as described by Haywood and Tzuriel (2002), is a type of interactive assessment that includes planned mediational teaching and monitors its effects on subsequent performance. The theoretical basis of Dynamic Assessment rests on four basic assumptions: (1) the assessed knowledge base is not an accurate indicator of the ability to acquire new knowledge; (2) no one functions at 100% capacity; (3) the best test of performance is a sample of that performance; and (4) obstacles can obscure one’s true ability and the removal of those obstacles may reveal ability that surpasses what was previously suspected.

The purpose of Dynamic Assessment is to determine what an examinee can do with help by intervening in the test situation. This idea comes from Vygotsky and his theory of scaffolding (guided assistance) to help the learner move through their zone of proximal development (ZPD). Vygotsky believed that scaffolding would help close the gap between a learner’s actual and potential performance (Abbott et al., 1997).

Reuven Feuerstein, an Israeli psychologist, has been the premier advocate for dynamic assessment since the 1970s. Feuerstein asserts that static assessment methods fail to adequately assess students because of: (1) the assumption that intelligence is a fixed entity and (2) the lack of accommodation in the presentation of assessment tasks to examinees (Feuerstein, Rand, Jensen, Kaniel, & Tzuriel, 1987). Feuerstein believes that because of such characteristics, static assessment methods cannot measure changeable
traits such as modifiability or the ability to learn (Feuerstein, 1979). Such assessment data, therefore, have little or no prescriptive value since student performance in static assessments is decontextualized from a teaching situation (Haywood, Brown, & Wingenfeld, 1990).

The Use of Assessment Information by Regular and Special Education Teachers

The role of the classroom teacher as one who should provide input to the MDT about student performance has been discussed earlier in this review. However, the role of the classroom teacher is critical for other reasons as well. The classroom teacher makes the initial decisions about accommodations students need to support instruction. The classroom teacher is also responsible for the successful implementation of instructional accommodations. The limited research available indicates that determining what accommodations individual students require is a difficult task. Knowledge of students’ skills is required but information about requirements of the instructional task to be accomplished is also essential. Many teachers do this naturally on a classroom level. However, making individualized instructional decisions requires specific knowledge about the skills of individual students (Thurlow & Ysseldyke, 2002).

IDEIA requires the IEP team to identify which instructional accommodations are appropriate for a disabled student and the IEP team can make general recommendations regarding instructional accommodations. Thurlow and Ysseldyke (2002) assert that communication with the IEP team and classroom teachers is essential for the successful implementation of accommodations. They point out that not all of a student’s teachers may attend the IEP meetings. IDEIA requires the presence of only one regular education
teacher (a curriculum representative) and one special education teacher (a service delivery representative) at IEP meetings.

Thurlow and Ysseldyke (2002) also contend that students should be instructed to aid in the identification of their own accommodation needs. They state that accommodating student needs is more complicated than a teacher deciding that a student needs a specific accommodation. Thurlow and Ysseldyke point out that an accommodation has little chance of success if the student does not agree that the accommodation is necessary and is unwilling to comply with its use. The authors contend that eventually students should be able to identify their own needs and request accommodations.

Traditional assessment methods may provide information regarding a student’s skills. However, because the testing is decontextualized, it cannot provide information regarding the requirements of the task to be accomplished. Reschly and Tilly (1999) assert that even the information provided by traditional assessment methods about specific skills is limited. They claim that scores on norm-referenced or standardized tests have no direct relationship to a student’s specific skills because the skills are merely sampled rather than covered thoroughly. Therefore, such scores can only determine a student’s standing relative to others with similar demographic characteristics. Furthermore, they assert that scores on norm-referenced standardized tests are not very useful in making decisions regarding instructional objectives, monitoring progress or assessing the benefits of special education programs.

How, then, do teachers use the assessment information they obtain from IEP
teams? Again, the research on this subject is limited and there are implications for further study in this area. From what research is available, it would seem that regular education teachers’ roles are often limited to participation on an IEP team or MDT to determine a student’s eligibility for special education services with little continuing involvement once the student’s eligibility for special education services is confirmed. Special education teachers’ roles have consisted of participation in team meetings, assisting in the assessment process and the delivery of special education services within a special setting for those who qualify (Carpenter, King-Sears, & Keys, 1998).

However, a study by Whittaker and Taylor (1995) showed that special education teachers have little time for analyzing assessment data and for creating subsequent intervention designs due to their multiple roles and lack of educational planning time. Their study showed that in addition to instructional planning, resource room teachers were also asked to meet with multidisciplinary teams, to evaluate students for placement, to communicate with parents, to perform classroom observations, and to plan for the provision of in-service instruction often without extended planning time in which to accomplish these tasks.

Research suggests that the involvement of the teacher in the use of assessment data appears to increase when a problem-solving approach is employed. The problem-solving approach differs from the traditional approach of using tests to determine eligibility for service. The problem-solving approach is a systematic approach to the identification of a student’s problem, the design and implementation of relevant interventions, and the ongoing monitoring and evaluation of the student’s educational
program. The problem-solving approach emphasizes the use of both functional and multidimensional assessment procedures. The assessment procedures utilized are selected based on a consideration of environmental, curricular and instructional variables in addition to those other variables that affect a student’s performance (Elliott & Sheridan, 1992).

The problem-solving approach differs from the traditional “refer-test-place” model in two important ways. First, the student does not meet eligibility for special education services because of his/her scores on IQ and achievement tests but instead because performance does not respond to a series of increasingly intensive regular education interventions. Second, because student placement is intervention-based rather than test-based, the need for categorization is eliminated. Students are not served based on placement in a category, such as learning disabled, thereby decreasing the opportunity for stigmatizing students. The use of a problem-solving model in defining learning problems, measuring student behavior, designing interventions and monitoring student progress involves the teacher at every step (Ysseldyke & Marston, 1999).

In problem-solving approaches, members of MDTs utilize a collaborative process within which to engage in problem-solving activities. A study by Telzrow, McNamara and Hollinger (2000) did not evaluate the quality or appropriateness of the interventions recommended by MDTs, but instead examined the degree of documented intervention integrity. Their findings indicated little or no evidence of treatment fidelity in their examination of MDT work products. The researchers were unsure whether this finding should have been attributed to the failure of MDTs to implement the interventions as
designed or whether they simply failed to document the implementation of the interventions. The researchers concluded with the recommendations that a well-conceptualized problem-solving model and adequate training and technical support for those treatment agents who will administer the treatment protocol are essential for treatment fidelity. MDT members are treatment agents and the recommended interventions are the treatment protocol. The researchers further conclude that until fidelity to problem-solving implementation can be reliably demonstrated in applied settings, its benefits for difficult-to-teach students cannot be determined.

Synthesis of the Literature

Teachers are presented with assessment data in multidisciplinary teams that have been used to determine eligibility for special education services and to categorize students for the delivery of those services. However, recent legislation (IDEIA and NCLB) mandates that the assessment data used by M-teams must also link to instruction and intervention design.

Teachers are in a unique position to determine the usefulness of assessment data to contribute to the selection of instructional strategies and intervention designs because of their roles in implementation and monitoring of student progress. However, little has been written about how teachers use assessment data or whether teachers even have the training to use assessment data. It has been suggested by recent researchers that many teachers find the usefulness of traditional assessment data to be limited to its ability to qualify a student as eligible for special education services. When the assessment data fail to do this, regular education teachers often have few other choices but to retreat to their
prior trial and error practices with regard to remedial instruction.

There are alternatives to traditional assessment methods that researchers have found to be effective in linking assessment results to instruction and intervention design. However, there have been criticisms of Response to Intervention (RTI) methods as the application of intervention procedures without identifying the underlying cause of the problems (Schine, 2006). Schine criticizes this approach as a waste of time and asserts that RTI could delay a diagnosis and the subsequent delivery of special education services for over 24 weeks. Ironically, this is the same argument that Reschly (2000) used against traditional assessment approaches that he said required a child to fail before they could even be referred for the kind of comprehensive psychoeducational evaluation Schine recommends. On two points Schine and Reschly would agree:

(1) The discrepancy model has been discredited as a criterion for the determination of need for special education services because focusing on the relationship between IQ and achievement scores can result in invalid assumptions about the learner.

(2) Research-based programs such as RTI open up teaching methods to regular education teachers that previously have been the province of special education teachers. While both Schine and Reschly applaud this development, both advocate the need for teacher training to include those methods. At this time, such training is not included in most teacher preparation programs.

There are, then, implications for the training of teachers, as well as school psychologists, in assessment methods that can be linked to instruction. The literature also
indicates a need for further research into the role of teachers in the generation of assessment data and how teachers use assessment data.

In this chapter, the researcher has provided additional background for this study. The relevant literature was summarized and presented. In the next chapter, the researcher will describe the methods and procedures that will be used in this study and the plan for the study’s statistical analysis of the data will be provided.
CHAPTER III

METHODS AND PROCEDURES

Overview

In this chapter, the researcher will describe the participants, research design, procedures, instrumentation, and statistical analyses that were used in the study. To review, this study’s four main research questions are:

1. Do middle school teachers find the assessment data they receive in MDT/IEP meetings useful in designing instruction?
2. Are certain types of assessment data perceived as being more useful than others in accomplishing the linkage of assessment to instruction and if so, which ones?
3. Is teacher usage of assessment data in instructional practices related to the teacher characteristics of experience, licensure, and/or training?
4. Is teacher participation in referral procedures and MDT/IEP teams related to their use of assessment results?

Participants

The studied population consisted of a sample of regular and special education teachers and their school psychologists in a Southeastern state. The participants in this study were 133 active teachers or school psychologists currently employed at public middle schools in the state of Tennessee during the spring of 2007. The participants were drawn from 23 middle schools in the state containing 6th, 7th and 8th grades. Additional demographic data on the participants can be found in Chapter IV.
Research Design

The research design used in this study can be classified as a quantitative descriptive design. This type of design is one where the researcher describes: (1) the status of individuals on relevant variables and, (2) the relationships among those variables. Quantitative descriptive designs fall into three categories: survey or epidemiological research, classification or data reduction research, and passive research (Heppner, Kivlighan, & Wampold, 1999).

This study is of the survey category in which data are collected via a questionnaire on variables, with statistical techniques then used to describe the relationships among the variables. Descriptive surveys often suggest what proportion of a population possesses certain characteristics or opinions and the extent to which events occur together. Descriptive surveys are not designed to explain events, nor do they demonstrate the existence of causal relationships between variables (Oppenheim, 1992). In this study, the researcher collected data on several variables and then used statistical analyses to describe the relationship among those variables.

Procedures

The sample studied was extracted by electronically submitting an original questionnaire constructed by the researcher to the e-mail addresses of 96 middle school principals in a Southeastern state. The researcher obtained permission from the Commissioner of Education of the state in order to distribute the questionnaire in this manner. The Director of Schools in each school’s district was also contacted for permission to distribute the questionnaire by letter (see Appendix A).
Principals helped disseminate the questionnaire to the active, certified special and regular education teachers and any school psychologists on their staffs. The questionnaire was accompanied by a participant letter and disclaimer form that asked the participants to complete the questionnaire voluntarily and also advised them of the minimal risk associated with their participation as well as the benefits anticipated from the research. Copies of the letters and the questionnaire constitute Appendices A through E. The questionnaire was loaded on SPSS (version 14.0) with the help of a member of the researcher’s affiliated university statistics department.

Instrumentation: Rationale for Using a Questionnaire

For this study, the researcher decided to use quantitative research methods. The rationale for this choice was twofold: one, the assumption that social phenomena could best be described by the use of systematic measurement and scientific assessment and two, that the purpose of this study was to describe a potentially large number of people and their beliefs and behaviors. The survey is an accepted quantitative method of which the self-administered questionnaire is a common type (Nardi, 2006).

Nardi (2006) asserted that questionnaires could provide useful data when the researcher wants to sample a large number of respondents who cannot be observed by qualitative methods. Nardi further noted that the use of a questionnaire is ideal when the researcher wants to measure the attitudes and opinions of a large pool of participants who are literate. Since the population sampled for measurement in this study consisted of currently employed teachers and school psychologists, the researcher was reasonably confident that the participants possessed the prerequisites of reading ability and education.
sufficient to respond. The researcher also had some confidence that this population had minimal problems with limitations of age or eyesight. The questionnaire was a cost-effective way to reach the large sample targeted for this study. It also required less labor than many methods of data collection and did not necessitate the training of data collectors.

Disadvantages of the questionnaire include: possible gaps between what participants may self-report and what they actually do; possible low return rates for computer-based surveys which can limit generalizability; no guarantee the respondent was the intended recipient; such surveys can be easy to overlook and it is easy to skip and/or misunderstand questions. Also, it can be difficult to establish reliability and validity with questionnaires that are of the one-time-use variety (Nardi, 2006).

Survey design and structure depend upon three factors: the purpose of the inquiry, the population being sampled and budgetary considerations. Establishing the purpose of the survey involves: (1) articulating the central aim of the study, (2) identifying subsidiary topics that support the purpose, and (3) developing more specific information requirements relating to the subsidiary topics. In this manner, the survey’s design is refined by moving from the general to the specific (Courtenay, 1978).

Peterson (2000) advised that questionnaires should also be structured in such a way as to facilitate completion. To that end, Peterson recommended the use of informative instructions, designing questions so that they are easily read, leaving adequate space for answers and a professional appearance. He also advised that the length of the questionnaire not exceed four pages, as anything longer may appear too
daunting a task to the respondent. Peterson also suggested that questionnaires be structured so that answers can be easily transferred to a form where they can be analyzed. He warned against context effects (the context of a question may have an effect on the meaning of a word) and advised that they may be minimized by careful consideration of the order in which the questions are asked. Converse and Presser (1986) concurred and stated that even seemingly insignificant changes in the wording of a question can shift the answers of respondents. They also advised that it could be difficult to predict in advance how the wording can affect responses.

Peterson (2000) stated that all questionnaires should consist of three sections: introductory questions, substantive questions, and classification questions. The introductory section consists of a communication to the participants from the researcher and usually is in the form of a cover or transmittal letter. These letters should convey the importance of the study and contain an attempt to establish rapport with the participant and a request for the participant’s help. The substantive question section contains those questions that are critical to the purpose of the study. The classification section is composed of questions that ascertain the demographic and/or socioeconomic characteristics of the participants.

Converse and Presser (1986) offered the following advice regarding the construction of questions:

1. Keep questions short: no more than 20 words.
2. Avoid “double vision”: don’t ask questions that are better treated as two separate questions.
3. Specific questions are preferable to more general ones that may be open to a wide range of interpretation.

4. Closed questions are preferable to open ones because they spell out the response options and are more specific.

5. Offer a no opinion or “don’t know” option. Research shows that some respondents will manufacture opinions when a choice is forced so filtering for no opinion is considered to be a good practice.

6. Use forced-choice questions, rather than agree/disagree choice questions. Research shows a tendency for respondents to agree regardless of the item content when given the “agree-disagree” choice.

Converse and Presser (1986) encouraged the use of pilot work as part of the questionnaire refinement process. They recommended successive trials to ascertain how people react to the items. The researcher in this study used a pilot study with the faculty of a middle school in a southeastern state. The researcher used Litwin’s (2003) checklist for pilot testing in order to assess how the survey instrument actually played out in the field. The sample size (42 teachers) was small but the results were of great help to the researcher in the refinement of the wording of the questions, determining the length and order of the questions and the appropriateness of the questions.

Development of the Questionnaire

In addition to the pilot study and research into questionnaire construction, other steps were taken to develop and refine the questionnaire. The questionnaire items used in the pilot study were developed based upon the researcher’s own professional experience
and a review of the available literature in the subject area. Items were added, deleted and altered based upon feedback provided by the pilot study participants. The result of this was the first revision. The members of the researcher’s doctoral committee then scrutinized the revised questionnaire. Their feedback was used to make more revisions. Experts in their respective fields, who made invaluable contributions to the final revision, then reviewed the questionnaire. Dr. Sherry Mee Bell, Associate Professor of Special Education Theory and Practice in Teacher Education at the University of Tennessee, evaluated the questionnaire for content validity with regard to the regular and special education teacher sections. Her suggestions regarding special education language and procedure as well as teacher training were especially instructive.

Dr. J. Michael Carrig, a school psychologist with 30 years of experience, a three-term President of the Tennessee Association of School Psychologists, a former member of the State Task Force on Special Education, and a former Director of Special Education and Pupil Services, also evaluated the questionnaire’s special education teacher sections and the school psychologist section for language, content validity and form. His expansive knowledge of LD assessment and identification methods and procedures as well as the types of tests most frequently used was extremely helpful and helped the researcher construct questions that were technically accurate and reflected the conditions that most teachers and psychologists would experience. His suggestions were invaluable to the researcher in their scope and perspective.

Dr. Judy Boser, Senior Research Associate of the Institute for Assessment and Evaluation at the University of Tennessee and a recipient of the research award for
contributions to survey research methodology in education from the American Educational Research Association (AERA), was of immense help in the choosing the type of question most likely to produce the desired data, the formatting of the questions, and the order of the questions. Her knowledge of survey techniques and her review of the questionnaire greatly facilitated its development.

Susan Bunch, Assistant Commissioner of Teaching and Learning at the Tennessee State Department of Education, was extremely helpful to the researcher in developing an alternate means of disseminating the questionnaire when the use of the Principals’ list serve was eliminated as an option. She was also influential in the development of the attached letters to the Principals and the Director of Schools letter.

The final stage of the questionnaire’s development (the conversion to an online questionnaire) was facilitated by Cary Springer of the University of Tennessee’s Statistical Consulting Department. Her Knowledge of the SPSS DimensionNet© Survey Builder was crucial to this process. With her assistance, the structuring of the questionnaire for an online format was accomplished and the insertion of the routing rules helped to insure that the questionnaire was as brief as possible for the respondents. The routing rules either deny or allow a respondent access to the next question(s) based on the response to the previous question. The insertion of the routing rules also increased the likelihood that respondents would not be presented with questions that they could not or should not answer due to lack of licensure, training or experience.

Ms. Springer also helped the researcher set up a drawing for four gift certificates to increase the response rate. Respondents could voluntarily choose to submit their e-
mail addresses at the end of the questionnaire in a separate data entry for the drawing. In this way the respondents’ e-mail addresses could not be linked to their responses to the questionnaire.

**Statistical Analysis Plan**

In this section, the plan for the statistical analyses of the data is provided. This includes: (1) a consideration of the statistical issues involved and (2) a focused look at each of the four main research questions, the data used to address each question, and the statistical procedures used to analyze the data.

With assistance from the university’s statistical consulting center, several statistical analysis procedures were performed on the collected data. Data were collected via an electronic questionnaire that was formatted on the SPSS statistical program (version 14.0).

To answer the four research questions, data were collected from selected items in the questionnaire (see Appendix E).

**General Statistical Considerations**

The use of the SPSS DimensionNet© program (version 4.0) meant that the responses of the teachers and school psychologists were entered directly into SPSS. This means there was no necessity for a data entry phase as would have been the case in a non-online (hard copy) survey.

Various statistical procedures were used to analyze the data. Primarily, data analysis was accomplished using the techniques of t-tests, Analysis of Variance (One-way ANOVAs, Two-way ANOVAs and Repeated Measures ANOVAs), and a Spearman’s Rho correlation.
For the purposes of this study, the level of significance was set to .05 for the inferential tests conducted to answer each question. For any post hoc analysis for the Repeated Measures ANOVA, the Bonferroni Correction was applied to control the likelihood of a Type I error. This treatment of the level of significance is analogous to the way a constant $\alpha$ is used across the multiple main-effect and interaction F-tests of an ANOVA having two or more factors.

Data and Procedures Used to Address the Research Questions

Question #1 - “Do middle school teachers find the assessment data they receive in MDT/IEP meetings useful in designing instruction?”

In order to answer this question, one-sample statistics were drawn from the data that addressed participant attitudes regarding the “helpfulness” and the “usefulness” of the assessment data they received. Participant responses to item 4C, “How helpful are your school’s assessment procedures for the evaluation of suspected learning disabilities in identifying the learning and performance needs of the student?”, and 7C, “How useful are your school’s assessment procedures for the evaluation of suspected learning disabilities in helping you to design instruction for the student?”, were used. The items were responded to on a 5-point Likert scale with 1 being “not helpful” or “not useful” and 5 being “very helpful” or “very useful.” These responses were used to produce mean scores for the participants for each of the two items. Then, one-sample $t$-tests were run to compare the means for “helpful” and “useful” to see if they were significantly different from 3 (a neutral response).
Question #2 – “Are some types of assessment data perceived as more useful than others in the linkage of assessment to instruction, and if so, which ones?”

In order to answer this question, data were extracted from the teacher responses to question 11C, “In your experience, which types of assessment information provided by the school psychologist are most helpful in determining the instructional needs of assessed students?” Rank the types of information listed below from 1 to 5, with 5 being the most helpful type of information provided by the school psychologist and 1 being the least helpful.” Respondents ranked their selections from the choices of: achievement test scores, IQ test scores, Curriculum Based Measures (CBM), Response to intervention (RTI), and classroom observations. Classroom observations are a required component of learning disability evaluations (20 U.S.C. § 1414 Evaluations and IEPs, IDEIA, 2004).

The statistical procedures performed on the data were as follows: a mean rank score was computed from the participants’ responses to the item for each of the five different types of assessment data (listed above). Then, Repeated Measures ANOVAs were run for all teachers as a group, and for special education and regular education teachers as separate groups to test for any significant differences in the teachers’ rankings of the assessment data, within each group. This was done to see if the teachers’ responses supported or negated the null hypothesis (H₀: Teachers will find each of the five types of assessment data equally helpful). Where significant differences were found to exist in the teachers’ rankings of the assessment data, a post hoc analysis pairwise comparison (paired t-tests) with a Bonferroni adjustment was performed.
Question #3 – “Is teacher usage of assessment data in their instructional practices related to the teacher characteristics of experience, type and degree of training, and licensure?”

To answer this question, the teachers’ responses to items 4D, “If you are a regular education teacher, how do you use the learning disability evaluation data to adjust a student’s instruction in the classroom?”, and 5D, “If you are a special education teacher providing resource, inclusion or consultative services to students with learning disabilities, how do you use the learning disability evaluation data to address the student’s instructional needs?”, were analyzed. The teacher’s responses were scored from 1 to 4 depending upon their choice (A = 1, B = 2, C = 3, and D = 4) that ranged from non-use of assessment data (1) to full usage of the assessment data (4).

The relationship between experience and the level of usage of assessment data was examined by taking the teachers’ scores for usage and the teacher responses to the question in the demographics section regarding their years of experience and performing a Spearman’s Rho correlation. This technique was utilized due to the non-normal distribution of experience.

To further analyze the relationship between teacher usage of assessment data and teacher training, and answer the question, “Do regular education teachers differ from special education teachers in their usage of assessment data to inform instruction?”, the scores on usage for the two groups were compared via an independent sample t-test. The t-test was done to analyze the relationship between the scores on usage (dependent variable) and type of training, regular or special education (independent variable).
Additionally, a three-group, one-way ANOVA was performed to look at the relationship between the amount of training (highest degree obtained) and the scores on usage.

A one-way ANOVA was to be performed to analyze the relationship between the scores on usage (dependent variable) and licensure (independent variable) but was eliminated from the data analysis because all but one of the survey’s respondents were licensed. Finally, it was planned to take the responses of the school psychologists to item 5E, “In your experience, are the majority of teachers at your current school adequately trained to understand the psychoeducational assessment data you present at MDT/IEP meetings and use it for instructional planning?” and compare them to the teachers’ responses to the item in the demographic section regarding teacher preparation, “Did your teacher preparation program provide you with sufficient understanding to interpret and use assessment data for instructional planning?” To compare the responses of the school psychologists with those of the teachers, a 2x2 chi-square was to be conducted with rows being the two groups (school psychologists and teachers) and the columns being “yes” and “no.” However, this plan was also eliminated from the statistical analysis of the data due to an insufficient response for analysis from school psychologists.

**Question #4 – “Is teacher participation in referral procedures and MDT/IEP assessment teams related to their use of assessment results?”**

To answer this question, the responses of teachers to items 1B, “Have you made referrals for special education evaluations directly to your school’s instructional support team in the previous school year?,” and 7B, “Do you attend IEP meetings after the
completion of the special education evaluation?”, were utilized along with the teachers’ scores for level of usage. Responses to these two items composed the two factors of attendance and referral (the independent variables). The dependent variable was the participants combined (summed) responses to 4D and 5D (level of usage). The data were analyzed with a two-way ANOVA that examined the effect that each of the factors had upon usage separately and together.

In this chapter, the researcher has explicated the methods and procedures that were used in the study. Descriptions of the participants, the research design, the instrumentation, and the plan of statistical analysis have been provided. In the next chapter, the researcher will present the results of the data analysis and provide answers to the research analysis.
CHAPTER IV

Results

In this chapter, the researcher will present the results of the data analysis. The chapter begins with some demographic data that describe the research participants. The remainder of the chapter addresses the answers to this study’s research questions.

Description of Study Population

Data collected on the participants provided information regarding their current position (special or regular education teacher or school psychologist), licensure, years of experience, highest degree obtained and their current type of classroom assignment. Data were also collected identifying the general region of the state in which participants were employed. As can be seen from Table 1, all but one of the 133 respondents were licensed at their current positions. The breakdown by position was as follows: 28 (21.1%) of the participants were special education teachers, 103 (77.4%) participants were regular education teachers and 2 (1.5%) participants were certified school psychologists.

The participants were also asked to state the highest educational degree they had obtained. There were 44 (33.1%) participants with B.S. degrees, 64 (48.1%) of the participants held Master’s degrees, 20 (15%) of the participants had obtained Ed.S. degrees, and 5 (3.8%) of the participants had received the degree of Ed.D. There were no Ph.D. respondents to the survey. The experience of the participants, in terms of years worked, ranged from a minimum of 0 (no experience prior to the current school year) to a maximum of 38 years of experience. The mean for the years of experience of the participants in this study was 10.41. The median was 8.0.
Table 1.

*Description of Study Population by Licensure, Position, Education and Experience*

<table>
<thead>
<tr>
<th></th>
<th>Count</th>
<th>%</th>
<th>Mean</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you licensed at your current position?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>132</td>
<td>99.2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>1</td>
<td>.8%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What is your current position?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Special Ed Teacher</td>
<td>28</td>
<td>21.1%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regular Ed Teacher</td>
<td>103</td>
<td>77.4%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Psychologist</td>
<td>2</td>
<td>1.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What is your highest degree attained?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B.S.</td>
<td>44</td>
<td>33.1%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.S.</td>
<td>64</td>
<td>48.1%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ed.S.</td>
<td>20</td>
<td>15.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ed.D.</td>
<td>5</td>
<td>3.8%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ph.D.</td>
<td>0</td>
<td>.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many years of experience do you have at your current position (not including this year)?</td>
<td>10.41</td>
<td>8.71</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Research Questions and Results

Question One – “Do middle school teachers find the assessment data they receive in MDT/IEP meetings useful in designing instruction?”

Results

To answer the first research question, responses to two questionnaire items produced mean scores for (1) the “helpfulness” of assessment data to identify learning and performance needs and (2) the “usefulness” of assessment data to inform instruction. These attributes were measured on a 5-point Likert scale where 1 = not helpful or not useful and 5 = very helpful or very useful. The mean score for “helpful” was 3.89 and the mean score for “useful” was 3.68. If the means are greater than 3, we can conclude the data are both helpful and useful. One-sample $t$-tests were then run to determine if the means were significantly different from 3.

The results of the $t$-tests are presented in Table 2. The $p$ values for both tests were less than .05 which indicates that both means were significantly greater than 3. Therefore, middle school teachers find the assessment data they receive in MDT/IEP meetings to be both helpful and useful in designing instruction. It should be noted that these findings concerning the “helpful” and “useful” means carry both statistical and practical significance. The Likert scale used extended from 1 to 5. Thus, the two observed means were each at least one third of the way from the scale’s midpoint to its maximum positive value.
Table 2.

T-Tests for Means of Helpfulness and Usefulness of Assessment Data to Teachers

<table>
<thead>
<tr>
<th>Test Value = 3</th>
<th>t</th>
<th>df</th>
<th>Sig. (2-tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>How helpful are your school's assessment procedures for the evaluation of suspected learning disabilities in identifying the learning and performance needs of the student?</td>
<td>10.797</td>
<td>112</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>How useful are your school's assessment procedures for the evaluation of suspected learning disabilities in helping you to design instruction for the evaluated students?</td>
<td>7.200</td>
<td>111</td>
<td>&lt;.001</td>
</tr>
</tbody>
</table>

Question Two – “Are some types of assessment data perceived as more helpful than others in the linkage of assessment to instruction, and if so, which ones?”

Results

Participating teachers were asked to rank five of the most commonly presented types of assessment data on a scale from 1 to 5 with 5 being the most helpful source of information and 1 being the least helpful. Descriptive statistics were computed (Table 3) to find the mean rank of each of the five types of assessment data: achievement test scores, IQ test scores, CBM, RTI, and classroom observations. The descriptive statistics produced mean rank scores of 3.51 for classroom observations, 3.01 for achievement test scores, 2.93 for RTI, 2.81 for CBM, and 2.74 for IQ test scores.
Table 3.

Descriptive Statistics for All Teacher Rankings of Helpfulness of Assessment Data

<table>
<thead>
<tr>
<th>Type of Assessment Data</th>
<th>Mean</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classroom Observations</td>
<td>3.51</td>
<td>1.399</td>
</tr>
<tr>
<td>Achievement test scores</td>
<td>3.00</td>
<td>1.379</td>
</tr>
<tr>
<td>Student's response to specific interventions of remedial instruction (RTI)</td>
<td>2.95</td>
<td>1.437</td>
</tr>
<tr>
<td>Curriculum Based Measures of Academic Progress (CBM)</td>
<td>2.82</td>
<td>1.289</td>
</tr>
<tr>
<td>IQ test scores</td>
<td>2.72</td>
<td>1.458</td>
</tr>
</tbody>
</table>

However, because the teacher preparation training for special education teachers differs from the training that regular education teachers receive, it was decided to examine the two groups separately to ascertain what effect (if any) their different types of training might have on their perceptions of the helpfulness of the different kinds of assessment data. Separate means were computed for each group and Repeated Measures ANOVAs were used to test for differences in the rankings of special education teachers and regular education teachers within the separate groups. When analyzed separately, the special education teachers’ mean ranks (presented in Table 4) were: 3.22 for achievement test scores, 3.04 for classroom observations, 3.04 for IQ test scores, 2.87 for CBM, and 2.82 for RTI. A Repeated Measures ANOVA was run and the results showed no significant difference existed in the special education teachers’ mean ranks ($F(4, 19) = .141, p = .965$).
Table 4.

Descriptive Statistics for Special Education Teacher Rankings of Helpfulness

<table>
<thead>
<tr>
<th>Type of Assessment Data</th>
<th>Mean</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achievement test scores</td>
<td>3.22</td>
<td>1.476</td>
</tr>
<tr>
<td>Classroom Observations</td>
<td>3.04</td>
<td>1.461</td>
</tr>
<tr>
<td>IQ test scores</td>
<td>3.04</td>
<td>1.492</td>
</tr>
<tr>
<td>Curriculum Based Measures of Academic Progress (CBM)</td>
<td>2.87</td>
<td>1.456</td>
</tr>
<tr>
<td>Student's response to specific interventions of remedial instruction (RTI)</td>
<td>2.83</td>
<td>1.302</td>
</tr>
</tbody>
</table>

The mean ranks for the regular education teacher group (Table 5), produced a different result: a mean rank of 3.65 for classroom observations, 2.99 for RTI, 2.94 for achievement test scores, 2.80 for CBM, and 2.63 for IQ test scores. A Repeated Measures ANOVA was performed to compare these mean ranks. The Repeated Measures ANOVA results were: $F(4, 76) = 4.443, p = .003$. Because the $p$-value was less than .05, it indicates a significant difference for at least one of the rankings.

In order to determine how the five types of data differed, paired $t$-tests were run (Table 6). Significant differences were found in the comparisons of classroom observations to three of the other four types of assessment data. The comparison of classroom observations to RTI was not significant after the Bonferroni Correction was applied resulting in an adjusted $p$ value of .066. However, because of the conservative nature of the Bonferroni and the fact that the adjusted $p$ value is still very close to the .05
Table 5.

Descriptive Statistics for Regular Education Teacher Rankings of Helpfulness

<table>
<thead>
<tr>
<th>Type of Assessment Data</th>
<th>Mean</th>
<th>Std. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classroom Observations</td>
<td>3.65</td>
<td>1.360</td>
</tr>
<tr>
<td>Student's response to specific interventions of remedial instruction (RTI)</td>
<td>2.99</td>
<td>1.480</td>
</tr>
<tr>
<td>Achievement test scores</td>
<td>2.94</td>
<td>1.353</td>
</tr>
<tr>
<td>Curriculum Based Measures of Academic Progress (CBM)</td>
<td>2.80</td>
<td>1.247</td>
</tr>
<tr>
<td>IQ test scores</td>
<td>2.63</td>
<td>1.444</td>
</tr>
</tbody>
</table>

Table 6.

Pairwise Comparisons (Paired T-Tests) for Regular Education Teachers’ Rankings

<table>
<thead>
<tr>
<th>(I) test</th>
<th>(J) test</th>
<th>Sig.</th>
<th>Adj Sig. (a)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achievement test scores</td>
<td>Classroom Observations</td>
<td>.002</td>
<td>.016</td>
</tr>
<tr>
<td></td>
<td>CBM</td>
<td>.552</td>
<td>1.000</td>
</tr>
<tr>
<td></td>
<td>IQ test scores</td>
<td>.189</td>
<td>1.000</td>
</tr>
<tr>
<td></td>
<td>RTI</td>
<td>.858</td>
<td>1.000</td>
</tr>
<tr>
<td>Classroom Observations</td>
<td>CBM</td>
<td>.001</td>
<td>.007</td>
</tr>
<tr>
<td></td>
<td>IQ test scores</td>
<td>&lt;.001</td>
<td>.003</td>
</tr>
<tr>
<td></td>
<td>RTI</td>
<td>.007</td>
<td>.066</td>
</tr>
<tr>
<td>Curriculum Based Measures of Academic Progress (CBM)</td>
<td>IQ test scores</td>
<td>.444</td>
<td>1.000</td>
</tr>
<tr>
<td></td>
<td>RTI</td>
<td>.420</td>
<td>1.000</td>
</tr>
<tr>
<td>IQ test scores</td>
<td>RTI</td>
<td>.171</td>
<td>1.000</td>
</tr>
</tbody>
</table>

a. Adjustment for Multiple Comparisons: Bonferroni
significance level, this result can be considered to be marginally significant. No other significant differences were found.

The data used in this question were analyzed via parametric measures because they were being treated as means rather than ranks. However, as a precaution the data were also analyzed via nonparametric measures. In the nonparametric analyses, the Friedman’s two-way ANOVA test for ranks was substituted for the Repeated Measures ANOVA test and the Wilcoxon Signed Ranks test was substituted for the Pairwise Comparisons test as the post hoc analysis. The results of the nonparametric measures were the same as the results of the parametric measures. The results of the parametric measures are reported here because the data were being treated as means rather than ranks and because the parametric measures are more robust.

*Question Three – “Is teacher usage of assessment data in their instructional practices related to the teacher characteristics of experience, type and degree of training, and licensure?”*

*Results*

Because experience was not normally distributed, a Spearman Correlation was computed to determine if a relationship existed between teachers’ level of usage and their level (years) of experience. The experience level of the participants ranged from 0 to 38 years with a median of 8.00. The results of the Spearman Correlation (Table 8) indicated a weak but positive relationship between years of experience and usage ($r_s = .209, p = .029$) indicating that as the level of experience goes up so does the level of usage. The coefficient of determination ($r^2 = .0437$) indicates that 4.37% of the variability of usage
can be explained by years of experience.

To see if there were differences in the level of assessment data usage between special and regular education teachers due to their different types of training, the participant responses to questions regarding the level of usage of assessment data by regular education teachers and special education teachers were scored on a scale from 1 to 4 with 1 being non-use of assessment data and 4 being full usage. The results were mean scores for level of usage of 3.13 for regular education teachers and 3.06 for special education teachers (average usage). An independent sample \( t \)-test was performed to analyze the relationship between the scores on usage (dependent variable) and position, special or regular education teacher (independent variable). Before running the \( t \)-test, the presumption of equal population variances was examined by running a Levene’s test for equality of variances. This check on the data indicated that the assumption was tenable \((F = 0.884, p = .349)\). The results of the \( t \)-test indicated no significant difference between the groups, \((t (107) = 2.99, p = .765)\).

The amount of teacher training was measured by education (using the participants’ responses to their highest degree of education obtained). Participants were placed into one of three groups by their answers: B.S., M.S. and Ed.S. or Ed.D. The Ed.S. and Ed.D participants were collapsed into one group because of the small number of Ed.D participants \((n = 5)\). There were no Ph.D. participants. The means for usage (see Table 7) by the three groups were as follows: B.S, \(M = 3.13\), M.S., \(M = 3.19\) and Ed.S. & Ed.D, \(M = 2.65\), indicating average usage for all three groups. A one-way ANOVA was performed and showed no significant difference in usage among the three
groups \( F(2, 106) = 2.18, p = .118 \).

Finally, licensure was omitted as a factor for analysis because all but one of the teacher participants were licensed. In addition, the planned comparison between the teachers’ responses regarding teacher training and those of the school psychologists on that subject was eliminated due to an insufficient response to the survey for analysis by the school psychologists.

**Table 7.**

*Means for Usage between Highest Degree of Education Groups*

<table>
<thead>
<tr>
<th>Amount of Education</th>
<th>Usage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highest Degree</td>
<td></td>
</tr>
<tr>
<td>B.S.</td>
<td>3.13</td>
</tr>
<tr>
<td>M.S.</td>
<td>3.19</td>
</tr>
<tr>
<td>Ed.S. / Ed.D</td>
<td>2.65</td>
</tr>
<tr>
<td>Std.</td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>.98</td>
</tr>
<tr>
<td>Dev</td>
<td>1.03</td>
</tr>
<tr>
<td></td>
<td>1.04</td>
</tr>
</tbody>
</table>

**Table 8.**

*Spearman’s Rho Correlation between Level of Experience and Level of Usage*

<table>
<thead>
<tr>
<th>Experience</th>
<th>Usage</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Correlation Coefficient</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
</tr>
</tbody>
</table>

* Correlation is significant at the 0.05 level (2-tailed)
** Coefficient of determination \( r^2 = .0437 \)
Question Four – “Is teacher participation in referral procedures and MDT/IEP assessment teams related to their use of assessment results?”

Results

To answer this question, the descriptive statistics of the participants’ responses to the survey items regarding referral procedures and MDT/IEP meeting attendance were analyzed. A two-way ANOVA was performed (Table 9) with the scores on usage as the dependent variable and referral and attendance as the independent variables.

Participation in the referral process by teachers was not shown to significantly affect usage ($F (1, 82) = 1.550, p = .217$).

However, attendance of MDT/IEP meetings was shown to have a significant effect on usage ($F (1, 82) = 7.944, p = .006$). The mean usage for those who attend is 3.16 while the mean usage for those who do not attend is 1.64, clearly indicating that those teachers who attend MDT/IEP meetings tend to use the assessment data more. The interaction between referrals and attendance was not significant.

Table 9.

ANOVA for Effects of Referral and Attendance on Usage

<table>
<thead>
<tr>
<th>Source</th>
<th>Type III Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referrals</td>
<td>1.503</td>
<td>1</td>
<td>1.503</td>
<td>1.550</td>
<td>.217</td>
</tr>
<tr>
<td>Attendance</td>
<td>7.704</td>
<td>1</td>
<td>7.704</td>
<td>7.944</td>
<td>.006</td>
</tr>
<tr>
<td>Referrals * Attendance</td>
<td>1.256</td>
<td>1</td>
<td>1.256</td>
<td>1.295</td>
<td>.258</td>
</tr>
<tr>
<td>Error</td>
<td>79.525</td>
<td>82</td>
<td>.970</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>893.000</td>
<td>86</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Summary of the Results

Answers to this study’s research questions are summarized as follows:

1. Teachers reported finding the assessment data they receive in MDT/IEP meetings to be significantly both helpful and useful in identifying the learning and performance needs of their students and in designing instruction for their students.

2. There was a significant difference in teacher perception of the helpfulness of different types of assessment data in the linkage of assessment to instruction. When the teachers’ rankings were analyzed as separate groups (regular and special education), the rankings by special education teachers of achievement test scores, CBM, classroom observations, IQ test scores, and RTI did not differ significantly. However, regular education teachers found classroom observations to be significantly more helpful than all of the other four types of assessment data. No significant differences were found between their rankings of the other four types of data.

3. Teacher usage of assessment data in their instructional practices did not appear to differ significantly between the regular and special education teachers. Therefore, the type of teacher preparation program (regular or special education) did not appear to have an effect on the level of reported teacher usage. The amount of teacher training, as measured by the highest educational degree obtained, also did not appear to have an effect on the level of usage. There was no significant difference in usage of assessment data among the three groups of educational degrees (B.S., M.S., and Ed.S./Ed.D.). However, teacher experience, as measured
by years of teaching, did show a weak but positive relationship to usage, indicating that as the level of experience (years) increases so does the level of usage.

4. Teacher participation in referral procedures of students with a suspected learning disability was not shown to significantly affect the level of usage by teachers of the learning disability evaluation data. However, teacher attendance at MDT/IEP meetings did have a significant effect on the level of usage of the evaluation data, indicating that teachers who attend the MDT/IEP meetings tend to use the evaluation data more than those who do not attend.

In this chapter, the researcher has presented the results of the data analysis and provided answers to the research questions. In the next chapter, the researcher will discuss the results and the implications of the results for practitioners, for the training of school psychologists and teachers, and the limitations of the study and directions for future research.
CHAPTER V

Discussion

In this chapter, the researcher will address general conclusions from the results of the study, implications for practitioners, implications for school psychologist and teacher training programs, limitations of the study, and directions for future research.

General Conclusions

The results of this study yield insight into the way teachers view the helpfulness and the usefulness of the assessment data from learning disability evaluations they receive in MDT/IEP meetings. It appears from the results of this study that teachers find these assessment data to be helpful in the identification of students’ learning and performance needs and also useful in the designing of instruction for students. This is not a surprising result for special education teachers who have more training in psychoeducational assessment methods than the average regular education teacher. It is somewhat surprising that regular education teachers also reported finding the data to be both helpful and useful when basic teacher training in psychoeducational assessment methods may be nonexistent or perfunctory at best. This may be due to reluctance on the part of teachers to admit that they do not use the assessment data provided to them in their instructional practices, or it may reflect a willingness on the part of teachers to use whatever information they can get, even if they don’t find it particularly helpful.

Those teachers who responded to items asking them why they found their school’s assessment procedures not helpful (in identifying students’ learning and performance needs) and not useful (in linking to instruction) responded that it was
because they did not know what the procedures were, did not understand the procedures, the results took too long (arrived too late to be useful in the school year), or there was a lack of communication between teachers and the school psychologist regarding the assessment procedures. Fagan and Wise (2000) advise that the best chance for successful teacher use of the assessment data involves the school psychologist embracing a consultation role. According to those authors, the use of consultation makes it more likely that the appropriate services will be delivered if a collaborative, problem-solving model is used.

However, when it comes to different types of assessment data, the gap widens between regular education teachers and special education teachers with regard to what data are perceived to be more helpful in linking to instruction. It appears that there are significant differences in the regular education teachers’ perceptions about the helpfulness of the most commonly presented types of assessment data.

Special education teachers perceived achievement test scores, CBM, classroom observations, IQ test scores, and RTI to be virtually equal in terms of their helpfulness in linking to instruction. As was previously noted, special education teachers generally receive more training in tests and measurements than most regular education teachers so it is not surprising that they should have less variability in their rankings of the helpfulness of the five types of assessment data. In fact, the assessment data type that received the highest ranking from special education teachers in the survey was achievement test scores, also not a surprising result since the special education teacher is often the assessment team member who administers the achievement test.
Due to the fact that achievement test scores can also be stated in grade levels, it is also not surprising that teachers would rank them as helpful in linking to instruction because scores stated in those terms tell a teacher where a student is in relation to his/her peers, the grade level of material needed for the student and what the student’s strengths and weaknesses are in a way teachers can easily understand. This may explain why teachers responding to the survey identified achievement tests as the type of test that was most often presented to them in MDT/IEP meetings for learning disability evaluations.

However, Reschly and Tilly (1999) warn that norm-referenced, standardized tests, such as achievement tests, tend to produce results that, although they may be indicative of a student’s relative standing and grade level performance, are inadequate for translating into specific instructional objectives or measuring growth in skill acquisition. The authors assert this is in part due to such tests merely sampling skills as opposed to covering them thoroughly.

In contrast, regular education teachers showed a significant preference for classroom observations over all of the other types of assessment data. Classroom observations require no specialized training in tests and measurements to comprehend and more importantly are not decontextualized. They are one of the few required components of a learning disability evaluation that actually take place in the student’s learning environment and so may give a very informative picture of what a student’s learning and performance needs are as well as the part environment plays in those needs. Regular education teachers were also asked in the survey, “What assessment information, that is currently not provided to you, would be most useful in designing
instruction for students with learning disabilities?” The most requested information, in response to this item, was classroom observations.

Conversely, IQ test scores received the regular education teachers’ lowest ranking for helpfulness in linkage to instruction, and yet 100% of the teachers responding to the survey named an IQ test as one of the tests their school psychologist used in LD evaluations. Achievement tests were also cited by 100% of the teachers as one of the tests used by their school psychologists in LD evaluations. Since IQ and Achievement test scores are the required elements for the discrepancy formula used to identify LD, it would appear that most of the respondents’ schools use these traditional assessment procedures. In fact, 94% of the survey’s respondents reported that their schools’ evaluation procedures for LD consisted of the school psychologist administering a battery of psychoeducational tests to the student and submitting a written report to the IEP team based on the results. Seventy-five percent of the respondents reported that additional criteria (Curriculum Based Measures and below grade level performance) were considered in addition to the test scores.

Problems associated with the use of the discrepancy criterion for identification of LD students were discussed at length in Chapter II. In addition to what has already been stated, Shinn, Good and Parker (1999) caution that use of the discrepancy method can result in students with average or above average reading scores and displaying little educational need being identified, while failing to identify students with reading achievement scores below a standard score of 70 (indicative of serious educational need). It does not appear from the results of the survey, that the type of teacher
preparation program (special or regular education) has a significant effect on the level of usage of assessment data that teachers report. Rathvon (1999) identifies the lack of training for teachers as a major barrier to the successful implementation of interventions based on assessment results. Rathvon concludes that this finding may be due to a lack of involvement by the school psychologist and/or a lack of administrative support. Rathvon suggests active participation by the school psychologist in consultation activities and the provision of training through inservice staff development activities, or workshops as possible remedies.

The amount of teacher training (highest degree obtained) also does not appear to have a significant effect on the level of assessment data usage. There was no significant difference in the level of usage of assessment data received in MDT/IEP teams between teachers with B.S., M.S., or Ed.S./Ed.D degrees. This finding may logically follow Zemba’s (1985) finding that the variable of highest degree obtained by assessment team members had no impact on placement decisions made in MDTs.

This finding may also suggest that special education teachers may receive sufficient education to use assessment data appropriately upon completing their certification programs. Conversely, regular education teachers at the middle school level may seek higher degrees that are in their subject area and so most likely would not receive training that would enhance their knowledge of the use of assessment results regardless of the postgraduate degree obtained.

Of the teacher characteristics examined in this survey, only experience appeared to have a relationship to the level of usage. A weak but positive relationship was shown
between years of experience and the level of usage indicating that as the level of teacher experience goes up, so does the level of assessment data usage. This may support the idea that teachers become more comfortable with the use of assessment data as they gain experience and also more knowledgeable about the kind of instructional information the data can provide. This finding may also suggest that more experienced teachers have had the time to go through trial and error to learn how to effectively use assessment data.

Finally, the results of this study revealed that teacher participation in the referral process apparently had no significant effect on the level of usage of assessment data. This is somewhat surprising since a referral for a psychoeducational evaluation for LD generally means that the teacher has exhausted their repertoire of regular education interventions and there is still a failure to respond by the student. It would seem that a teacher who refers out would be desperate for any information available to help a student.

On the other hand, referring out could mean that the teacher has already given up on the student and believes that the student can best be helped by a special education placement in a resource room or inclusion class.

Rathvon (1999) confirmed the tendency of teachers to refer as a last resort, after all else has failed. She warns that teachers who refer on this basis tend to be the most resistant to consultation because they attribute student problems to “within child” causes or to family problems that teachers have no control over. For teachers with this outlook Rathvon says, referral makes sense, as a way of removing the student from their classroom to a more specialized setting where they feel the student can access needed services. Therefore, these teachers are referring with the purpose of removing the student
from the classroom and are not interested in implementing interventions with the purpose of allowing the student to stay in their classroom. Rathvon reports that if special services are not offered, teachers may even view the school psychologist as preventing the student from receiving needed services.

However, a study by Waldron, McLeskey, Skiba, Jancaus, and Schumeyer (1998) of high and low referring teachers found that while low referring teachers did tend to use referrals as a last resort, after trying a large number of interventions, high referring teachers tend to use referral as the first stop in a problem-solving process for the student. Therefore, referral, by itself, may or may not indicate an interest in acquiring assessment data for teacher use.

In contrast, teacher participation in MDT/IEP meetings appears to have a significant effect on teacher usage of assessment results. It seems that teachers who attend the meetings have a significantly higher level of usage of assessment data than those who do not attend. This is probably a logical consequence of being in the presence of the assessment specialist(s) who produced the assessment results and being able to hear the results interpreted as well as having a chance to ask questions about the tests used and how these results should impact instructional practices. In light of these results, it would seem to make sense for all teachers who instruct the student to attend the MDT/IEP meetings. Nevertheless, teachers have many demands on their time and increasingly hectic schedules, and at this time, IDEIA (Section 614, Part B) requires the presence of only one regular education representative at the MDT/IEP meeting. Spencer-Dobson (1985) and Duffy (1983) confirmed that the presence of only one regular
education teacher at meetings was the routine practice.

This requirement may be sufficient for primary and intermediate school students who are in self-contained classrooms where they more than likely have only one regular education teacher. In middle schools, however, the story is often very different. Middle school students may have as many as six or more regular education teachers involved in their instruction. While anyone who teaches an identified student is required to read the IEP developed for the student and follow its goals, objectives, and required accommodations, reading the IEP cannot possibly impart all of the information attendants of the meetings may be able to use effectively for instructional purposes.

The benefits of participation in MDT/IEP meetings have been confirmed by several studies. Duffy (1983), Kirshner (1990), and Merrill (1991) all found that increased participation in MDT decision-making increased perception of the accuracy of the assessment data for planning instructional interventions.

Implications for Practitioners

This study provides a number of implications that may assist school psychologists and teachers in their use of assessment data. First, school psychologists need to be aware of teacher views of the weaknesses of traditional assessment data to inform their instructional practices. Such data are decontextualized and provide a weak instructional link. Furthermore, the data currently used for LD classification are not adequate for informing the design of instructional interventions. In light of the mandates of IDEIA and NCLB, school psychologists need to insist on the use of more contextualized assessment methods such as CBM or Dynamic Assessment. School psychologists also
need to be more engaged in the delivery of services other than testing, particularly consultation activities and staff development. Fagan and Wise (2000) suggest that the school psychologist’s first step after receiving a referral should be to meet with the teacher who made the referral and together determine the specific referral questions. The results of this survey indicated confusion on the part of some teachers as to who formulates the referral questions.

For their part, teachers need to question the assessment specialists about the methods they use for LD evaluations. Teachers should not be reluctant to ask for either individual consultation or advice in MDT/IEP meetings as to how they can best use the assessment specialists’ results in their instructional practices. They should also be vocal about what types of assessment data they find helpful and what is not helpful in identifying students’ needs and designing instruction. Teachers should insist on more contextualized data such as Curriculum Based Assessment and Direct Observation.

Finally, referral for a psychoeducational evaluation should not be viewed by teachers as a last resort or as an end point to their involvement with the student. Rather, it should be seen as the first step in a problem-solving process. Participation in MDT/IEP meetings has been shown to positively affect teacher use of assessment results. Teachers should, therefore make every effort possible to attend these meetings for their students.

*Implications for School Psychologist and Teacher Training Programs*

The training of school psychologists is in the middle of a paradigm shift that needs to continue away from a psychometric focus and toward an edumetric one.
Administrators of school psychology training programs need to reassess the use IQ tests as part of a comprehensive evaluation for LD. More emphasis should be placed on training school psychologists in assessment methods that produce data that teachers can use for instructional practices, in consultation and counseling skills, and in the design of instructional interventions.

On the other hand, teacher training programs need to focus on training teachers in assessment as an ongoing process of measuring progress and adjusting instruction as opposed to a device for only determining grades or pass/fail rates. Because of the renewed commitment of IDEIA to the concept of Least Restrictive Environment (LRE) and its promise to monitor and enforce its application (IDEIA: Section 616 Part A, paragraph 3), virtually all teachers are in a sense special education teachers. Therefore, teacher-training programs need to provide education in assessment methods used by assessment specialists and instruction as to how the data they produce can be translated into use for instructional intervention.

Limitations of the Study and Directions for Future Research

While this study resulted in some important findings, there were some limitations that may have influenced the results and, therefore should be addressed. First, as noted in Chapter I, the method employed to gather the data was a self-report survey. Nardi (2006) noted that a disadvantage of this method was that there may be gaps between what participants self-report and what may be actual practice. Nardi also warned that there is no way to verify that the intended recipient is the respondent.

Another limitation was the small sample size of the survey. Both Nardi (2006)
and Heppner et al. (1999) warned that small sample size could limit generalizability to the larger population. Nardi advised that possible low return rates for computer-based surveys, which can be easy to overlook, are a disadvantage of using questionnaires. Future studies in this area would be enhanced by expanding the sample size, perhaps by data collection in multiple states instead of just one, as in this study.

Within the categories of positions there were a small number of special education teachers (28) that responded to the survey. This may not be enough to give the study power. In other words, there may not have been enough responses from special education teachers to know if they, as a population, actually feel this way or if the sample size was simply not large enough. Additionally, there was an insufficient response by school psychologists (2 respondents). Therefore, no corroboration of the teachers’ responses regarding the assessment practices of their school psychologists is available.

A third limitation of this study was that the participants were not randomly selected. Participants voluntarily chose to complete the questionnaire. Also, the director of schools for each school district and the principal of each participating school voluntarily chose to allow their school psychologists and teachers to participate in the survey. Heppner et al. (1999) strongly advise the use of random sampling methods to control for the effects of sampling characteristics.

A fourth limitation of this study was in the construction of the questionnaire. Some of the items allowed a range of response that was on a scale of 1 to 4 or 1 to 5. A response scale of 1 to 10 would have allowed for greater variability and discrimination in
the teachers’ scale score on those items.

A fifth limitation of the study was in an aspect of the SPSS Dimension Net statistical package. While the use of this statistical package greatly facilitated many areas of the survey, it did possess one feature that limited the number of complete responses to the survey. In all, 200 school psychologists and teachers attempted the survey. However, only 112 completed the entire questionnaire successfully. By utilizing the responses of participants who had completed most of the questionnaire, another 21 participants were added making a total of 133. Nonetheless, 63 participants were lost due to time outs. A time out occurred when a participant opened the survey and at some point during the process, the browser window closed. C. Springer (personal communication, June 28, 2007) said that a session would stay open and active as long as the respondent did not close the browser window. However, there is no way of knowing whether the participants closed the browser window themselves, or if the window closed because it was open too long. The session stays active on the server for however long the timer is set. An organization or an individual can program a specific timeout on a computer system. If the school system sets the timer on its server for five minutes or less, it is quite possible (especially with the questionnaire being delivered to busy school psychologists and teachers at work) that a respondent might have left the computer to attend to a task or an emergency and when they returned, found the page expired. In addition, there is a feature for quitting the survey, if a participant wants to quit. In this questionnaire, 0 sessions were stopped by the respondents. Four sessions were lost due to interview system shutdown.
Another 40 principals and other administrators attempted the test survey which was made available to them so that they might approve the questionnaire and even take it themselves without their responses being counted into the survey. Of this group, 27 completed the questionnaire successfully, 10 timed out and 3 were stopped by an interview system shutdown.

Finally, the timing of the release of the questionnaire was a limitation of the study that probably had a significant effect on the response rate. Due to several factors, the questionnaire did not become available to school psychologists and teachers until April 2007. Some did not receive the questionnaire until May. The months of April and May are extremely busy times for school psychologists and teachers. School psychologists have end of year MDT/IEP meetings, evaluations and re-evaluations, and report writing that must be accomplished before the end of the year. Teachers have achievement testing, end of course testing, field trips, retention meetings, MDT/IEP meetings, as well as several other online surveys and reports that are state-mandated. Therefore, this survey had serious competition for potential participants’ time. As one administrator said, “Because it is so close to the end of our school year, we can not in good conscience give our teachers one more thing to think about doing.” (J. Wheeler, personal communication, May 15, 2007) A principal said, “I am not interested in being part of the survey. At this date, we are swamped with end of year paperwork and data.” (B. Wood, personal communication, May 15, 2007) Even those administrators that approved the survey expressed concern about the timing. One principal said, “Mr. Odom is correct in thinking that teachers are pretty maxed right now. If anyone wants to respond, it will be
up to them to take the time to do so.” (P. Essary, personal communication, May 14, 2007). Another principal said, “I have no idea how many of them (faculty members) will respond as this is a very busy time of year.” (W. Shelton, personal communication, May 11, 2007)

The response rate for electronic surveys is generally around 15% to 20% (C. Springer, personal communication, June 28, 2007). Given these problems, it is no surprise that the response rate was at risk. The researcher cannot know for sure how many potential participants there were since the exact size of each school’s faculty is unknown. Therefore, the response rate can only be estimated. Twenty-three schools reported back to the researcher that they had forwarded the questionnaire to their staff members. The average faculty size is estimated to be around 30 for a middle school with three grade levels. That would mean an estimated response rate of almost 20% was achieved. Given the circumstances, the researcher is very grateful to those participants who took the time to respond.

There are a number of directions for future research related to this study. One avenue for exploration would be to examine exactly how teachers use assessment data in their instructional practices. Another area of concern that this study highlighted would be the working relationship between assessment specialists and teachers. It would be interesting to look at how the data produced by each of the assessment team members is integrated into instructional practices by teachers. Due to the insufficient response of school psychologists to this survey, it is still not known how school psychologists view the training of teachers and their ability to understand and use assessment data. This
should be further explored because of the implications for the effectiveness of MDT/IEP team functioning. In terms of teacher response to their satisfaction with the assessment data they currently receive, another study might delve into giving teachers the opportunity to experience comparing and contrasting the application of data from contextualized assessments (i.e., CBM, RTI, Dynamic Assessment) and psychometric data. After the opportunity to compare the different types of data, it is probable that a more accurate picture of teacher satisfaction with the usefulness of assessment data could be obtained.

One of the weaknesses of this study is that teachers who claimed to be satisfied with the usefulness of their schools’ assessment data from learning disability evaluations may not have been able to accurately discriminate between the types of data they were asked to rate because of a lack of exposure to some of the types of data (e.g., normed achievement scores versus curriculum-based measures).

Another weakness of this study was the unintended exclusion of participants from some of the state’s larger, urban (and more culturally diverse) school systems. This exclusion happened partially due to the timing of the study. These school systems already have several large universities located within their school districts and so are inundated with requests to do research in their schools. In order to manage such a large number of requests, these school systems have instituted application for permission to do research protocols that can take weeks to complete. Thus, by the time the researcher had achieved compliance with the protocols and obtained permission, it was too late in the school year to distribute the questionnaire. However, the researcher’s decision to delimit
the schools in the study to only those with 6th, 7th, and 8th grades also unintentionally eliminated many of the middle schools in the larger, urban school districts with different grade level configurations. Future studies would probably benefit from the inclusion of the more diverse school systems, therefore future researchers in this area might wish to consider a less rigid definition of a middle school than the one employed in this study.

In conclusion, the results of this study suggest that assessment specialists and teachers need to consider the instruments and methods used to evaluate students and the usefulness of the data produced by them. As previously stated, assessment is moving away from grouping and classifying students and toward assessment that facilitates learning and improved instruction. Therefore, assessment data collected on students, particularly those with suspected learning disabilities, must demonstrate usefulness in furthering learning through instructional interventions. Assessment, then, should be seen as part of the learning process and not separate from it.


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APPENDICES
Appendix A: Director of Schools Letter

To: The Director of Schools
From: Carole Cavender Witt
Re: Survey of Teacher Use of Assessment Results
March 27, 2007

I, Carole Cavender Witt, am an educator, a school counselor and a doctoral candidate in the Department of Educational Psychology in the College of Education, Health, and Human Sciences at the University of Tennessee at Knoxville. I am writing this introductory letter to apprise you of my dissertation research on teacher use of assessment results provided by evaluations of students with suspected learning disabilities. I am under the supervision of Dr. Schuyler Huck but I am the contact person and the principal investigator of this research project that I believe should be of interest to you and the educators in your district.

With your approval and support as Director of Schools, I would like to distribute an electronic questionnaire to do a survey of the regular and special education teachers and the school psychologists in your school district as to their perceptions of the use of assessment results to inform instructional practices. I have received permission from the State Department of Education to distribute my questionnaire to the principals of middle schools in Tennessee with instructions to please forward it on to their teachers and psychologists. My hope is that you will encourage them to do so as I believe that this study has important implications for currently practicing teachers and psychologists as well as training for those professionals of the future. The responses of the participants will be anonymous and there is no risk to the participants. The responses will be subjected to statistical analysis via SPSS. I would be delighted to provide you with a summary of the results upon request.

With the mandates of IDEIA and NCLB that assessment should link to instruction, I believe it is a timely and important exercise for those individuals involved with assessment and instruction to reflect upon the effectiveness of the current methods in use. I hope that you will encourage the participation of the middle schools in your district. Please contact me at: the Department of Applied Educational Psychology, the University of Tennessee, A525, Claxton Complex, Knoxville Tennessee, 37996-3452 if you have any questions. You may also e-mail me at cwitt@utk.edu.

Thank you,
Carole Cavender Witt
Appendix B: Principals’ Letter

From: Carole Cavender Witt  
Department of Applied Educational Psychology  
The University of Tennessee  
Knoxville, Tennessee

To: Middle School Principals  
of Public Schools in the State of Tennessee  
March 27th, 2007

Dear Principal:  
I am requesting your help in contacting the school psychologist and both special and regular education teachers in your school for participation in a research study I am conducting as part of my doctoral dissertation at the University of Tennessee. The research study involves having the school psychologist and the regular and special education teachers respond to a questionnaire (see attachment) that will assess teacher use of assessment data obtained in the evaluation of students with suspected learning disabilities.

With the most recent reauthorization of IDEIA and the mandates of NCLB, pertinent questions have been raised regarding current assessment practices and their usefulness in linking assessment to instruction. The resulting scrutiny makes it vitally important that teacher involvement in the use of assessment data be determined in order to help promote assessment practices that are more helpful in developing effective instructional programs for students. I believe that this study has important benefits for practicing teachers by prompting their reflection on their satisfaction with the usefulness of psychoeducational assessment data as well as providing implications for the training of future teachers.

With your cooperation, I am requesting that your school psychologist and teachers complete the questionnaire available to them through the link in the attachment. The teachers’ responses will be recorded in such a way that their identity cannot be revealed and there can be no risk to the participants of any criminal or civil liability, or any other damages due to the disclosure of their responses. In order to promote a higher response rate, there will be a drawing for four 25$ gift certificates to Amazon.com that the participants can choose to enter. Because the drawing will have a separate data entry, there will be no way to pair up their responses with their identity. This way, they can enter the drawing and receive a prize but their survey responses will remain anonymous. If you could be so kind as to forward the attachment to your teachers, you will contribute to the furthering of this research as well as have my deepest appreciation.

Thank you,  
Carole Cavender Witt, M.S.
Appendix C: Participant Letter

From: Carole Cavender Witt
To: Regular and Special Education Teachers and School Psychologists
Subject: Teacher use of Student Assessment Data

Opportunity to contribute to research on the usefulness of student assessment data!

You are invited to participate in a research project to learn more about how teachers feel about the student assessment data provided to them at assessment/instructional support meetings and its usefulness in the diagnosis of learning problems and instructional design. This study is being conducted by Carole Cavender Witt, M.S. under the supervision of Dr. Schuyler Huck, Professor in the Department of Applied Educational Psychology at the University of Tennessee, Knoxville. If you are interested in contributing 10-15 minutes of your time to advance our understanding of this important educational issue, please click on the link below and complete the survey. We thank you for your time and effort in contributing to our research project.

Carole Cavender Witt, M.S.
Schuyler Huck, Ph.D.
Department of Applied Educational Psychology
University of Tennessee
A 525, Claxton Complex
Knoxville, Tennessee 37996-3452
Appendix D: Disclaimer Form

PARTICIPANT’S DISCLAIMER FORM

Teacher Use of Assessment Data Presented in Assessment/Instructional Support Teams from the Evaluations of Students with Suspected Learning Disabilities

You are being invited to participate voluntarily in the above-titled research study. The purpose of this study is to investigate the opinions of teachers with regard to the usefulness of assessment data they are typically presented with at assessment and/or instructional support team meetings. You are eligible to participate because you are a teacher or a school psychologist in a public middle school containing grades 6, 7 and 8 in the state of Tennessee. This study is being conducted by Carole Cavender Witt, M.S. under the supervision of Dr. Schuyler Huck in the Department of Applied Educational Psychology at the University of Tennessee.

If you choose to participate, your participation will involve completing an on-line survey that asks several questions about your attitudes and experience with the usefulness of assessment data. The questionnaire will take approximately 10-15 minutes to complete. You may choose not to answer some of the questions. You will be asked to provide some information about yourself, but you will not provide your name or any other information that could be used to identify you. All data are anonymous and will be located on a secure server. The server will be able to identify the machine on which the survey was completed, but cannot identify the user of the machine. That data will be used to check for duplicate submissions, and then deleted. Only the principal investigator (Ms. Witt) and Dr. Schuyler Huck will have access to the data.

You may withdraw from the study at any time. There are no known risks from your participation, and no direct benefits to you are expected. We hope, however, that the information provided would help towards our understanding of how teachers view the diagnostic validity and linkage to instruction value of different kinds of assessment data. There is no cost to you other than your time and you will not be compensated for your participation. At the end of the survey you will be asked if you would like to enter a drawing for four 25$ gift certificates from Amazon.com. An entry will require that you identify yourself, but because this will be a separate data entry there will be no way to link your identity with your survey responses. Entry in the drawing is optional and voluntary.

You can obtain further information from the principal investigator, Carole Cavender Witt,
M.S. at (865) 977-5493, ext. 2158 or Dr. Schuyler Huck at (865) 974-4040. If you have questions concerning your rights as a research subject, you may call the Office of Research, Internal Review Board at the University of Tennessee at (865) 974-3466.

By participating in the study, you are giving permission for the investigator to use your information for research purposes.

Thank you,

Carole Cavender Witt, M.S.
Doctoral Student
Department of Applied Educational Psychology
University of Tennessee

Participants Click Here
Appendix E: The Questionnaire

Middle School Teacher Use of Assessment Results from Students Evaluated for Learning Disabilities

The purpose of the following survey is to obtain information from practicing middle school teachers regarding their involvement in the referral and IEP Team functions for students evaluated for suspected learning disabilities. This survey will also assess teacher use of assessment data in the design of instruction for the evaluated students. School psychologists will also be surveyed regarding their observations of teacher use of assessment data.

Demographic Data

<table>
<thead>
<tr>
<th>Current Position</th>
<th>Licensed at current position</th>
</tr>
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<tbody>
<tr>
<td>Participant ID#:</td>
<td>Special Ed</td>
</tr>
<tr>
<td>School ID#:</td>
<td>Regular Ed</td>
</tr>
<tr>
<td>School District:</td>
<td>School Psychologist</td>
</tr>
</tbody>
</table>

Years of experience at your current position (not including this year): ____________

Highest Degree Attained (check one): B.S. M.S. Ed.S. Ed.D. Ph.D.

Teachers’ Current Placement

Classroom Assignment (check all that apply): Do you serve more than one school? ______

A. Self-contained regular education
B. Self-contained special education
C. Single Subject regular education
D. Resource Special Education
E. Inclusion Classroom

If yes, check all that apply
A. High School
B. Middle or Junior High School
C. Intermediate/Primary School
D. K-8 School

Did your teacher preparation program provide you with sufficient understanding to interpret and use assessment data for instructional planning?

A. Yes
B. No
Part A: Pre-referral Activities - Regular Education Teachers, only

1. Are you involved in any of the following on a quarterly basis? (Check all that apply)
   _____ A. Pre-referral instructional intervention activities
   _____ B. Pre-referral parent conferences
   _____ C. Instructional Support Teams
   _____ D. No, I am not involved in pre-referral instructional intervention activities or meetings.

2. Which of the following activities do you utilize prior to making a referral to the student support team? (Check all that apply)
   _____ A. I give the student extended time for work completion.
   _____ B. I repeat directions as needed.
   _____ C. I use peer helpers, parent volunteers, and teaching assistants with the student.
   _____ D. I give the student increased one-on-one instruction, myself.
   _____ E. I consult with other staff (teachers, counselors, or the school psychologist) regarding appropriate interventions to remedy the student’s specific skill deficit.
   _____ F. I assess the student’s response to interventions and evaluate the need for further interventions.
   _____ G. I (or with the student support team) conduct a curriculum based assessment to determine the student’s status with regard to skills and knowledge in specific academic areas.
   _____ H. I complete a checklist for the student support/IEP team of accommodations I have implemented prior to referral to improve the student’s performance.
   _____ I. None of the above
Part B: Student Referral/Assessment Team Involvement - Regular Ed Teachers, only

1. Have you made referrals for special education evaluations directly to your school’s instructional support team in the previous school year?
   _____ A. Yes
   _____ B. No

2. If you answered yes to the previous question, approximately how many students do you refer to the school instructional support team for a special education evaluation each year?
   _____ A. 1 – 3 per year
   _____ B. 4 – 5 per year
   _____ C. More than 5 per year

3. What are the most common reasons that you make referrals to the instructional support/assessment team? Rank from 1 to 5, with 5 being the most common reason and 1 being the least common reason that you would make a referral.
   _____ A. Behavioral Problems
   _____ B. Emotional Problems
   _____ C. Lack of Motivation
   _____ D. Poor Academic Performance
   _____ E. Suspected Cognitive Deficiencies

4. Do you formulate the referral question(s) when you make a referral?
   _____ A. Yes
   _____ B. No
   _____ C. Someone else formulates the question (specify who)

5. Have you been involved in reporting your observations of a referred student to the IEP/instructional support team?
   _____ A. Yes
   _____ B. No
6. **If you answered yes to the previous question,** specify the type of observation:

   _____ (1) Informal Classroom Observation
   _____ (2) Checklist/Rating Form
   _____ (3) Both A and B
   _____ (4) Other (specify)__________________

7. Do you attend IEP meetings after the completion of the special education evaluation?

   _____ A. Yes
   _____ B. No

8. **If you answered yes to the previous question,** how many total IEP team meetings per year would you estimate that you attend?

   _____ A. 1–10 meetings per year
   _____ B. 11–25 meetings per year
   _____ C. 26 or more meetings per year

9. Do you believe that your input at IEP team meetings is factored into the development of the Individualized Education Plan (IEP) of a student with learning disabilities?

   _____ A. Yes
   _____ B. No
   _____ C. Sometimes

**Part C: Assessment Procedures/Methods Used in Learning Disabilities Assessment (Regular and Special Education Teachers)**

1. Does the interpreter of test results (the school psychologist or other assessment specialist) identify for the IEP team the assessment components used in an evaluation for learning disabilities at your school?

   _____ A. Yes
   _____ B. No
2. **If you answered yes to the previous question**, which of the following choices describes your school’s evaluation procedures for identifying students with suspected learning disabilities? Check all that apply.

_____ A. The school psychologist administers a battery of tests to the student and makes written recommendations to the IEP team based on the results.

_____ B. Below grade level performance based on curriculum-based measures.

_____ C. Consistent below grade level performance and failure to respond to regular education modifications.

_____ D. Other (describe)____________________________________________

3. If your school’s evaluation procedures for learning disabilities include testing by the school psychologist, please check any of the tests listed below that you believe your school psychologist uses in such an evaluation.

_____ A. Differential Ability Scales (DAS)

_____ B. Kaufman Assessment Battery for Children, Second Edition (KABC-II)

_____ C. Kaufman Test of Educational Achievement, Second Edition (KTEA-II)

_____ D. Stanford-Binet Intelligence Scales, Fifth Edition (SB5)

_____ E. Wechsler Intelligence Scale for Children, Fourth Edition (WISC-IV)

_____ F. Wechsler Individual Achievement Test, Second Edition (WIAT-II)

_____ G. Woodcock-Johnson III Achievement Battery (WJ-III)

_____ H. Other (specify)_______________________________________

_____ I. None of the above.

4. How helpful are your school’s assessment procedures for the evaluation of suspected learning disabilities in identifying the learning and performance needs of the student?

<table>
<thead>
<tr>
<th>Not Helpful</th>
<th>Very Helpful</th>
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<tbody>
<tr>
<td>1</td>
<td>5</td>
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<td>2</td>
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<td>3</td>
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<td>4</td>
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5. **If your rating in the previous question was a 4 or 5**, what information produced by the assessment procedures did you find most helpful?__________________________________________
6. If your rating in question 4 was a 1 or 2, explain why you feel the assessment procedures used at your school are not helpful in the identification of the learning and performance needs of your students.

________________________________________________________________________

7. How useful are your school’s assessment procedures for the evaluation of suspected learning disabilities in helping you to design instruction for the student? (Rate on a scale from 1 to 5)

<table>
<thead>
<tr>
<th>Not Useful</th>
<th>Very Useful</th>
</tr>
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<tbody>
<tr>
<td>1  O</td>
<td>5  O</td>
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<tr>
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<td>4  O</td>
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<td>3  O</td>
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</table>

8. If your rating in question 7 was a 4 or 5, what information produced by the assessment procedures did you find useful in helping to design instruction?

________________________________________________________________________

9. If your rating in question 7 was a 1 or a 2, explain why your school’s assessment procedures are not useful to you in designing instruction for the evaluated student.

________________________________________________________________________

10. In the assessment of learning disabilities, what assessment information is generally provided by the school psychologist to the assessment/IEP teams in which you have participated? (Check all that apply)

   ___ A. Achievement Test scores
   ___ B. Classroom Observations
   ___ C. Curriculum Based Measures of Academic Progress (CBM)
   ___ D. IQ test scores
   ___ E. Student’s response to specific interventions of remedial instruction (RTI)
   ___ F. I don’t know
11. In your experience, which types of assessment information provided by the school psychologist are most helpful in determining the instructional needs of assessed students? **Rank the types of information listed below from 1 to 5, with 5 being the most helpful type of information provided by the school psychologist and 1 being the least helpful.**

A. Achievement Test Scores  
B. Classroom Observations  
C. Curriculum Based Measures of Academic Progress (CBM)  
D. IQ Test Scores  
E. Student’s response to specific interventions of remedial instruction (RTI)

12. What kind of assessment information that is currently not provided to you, would be useful in designing instruction for students with learning disabilities?

__________________________________________________________________

**Part D: The Use of Learning Disability Evaluation Results**

1. Does the information derived from your school psychologist’s evaluation of students with learning disabilities answer the referral questions? (Rate on a scale from 1 to 5)

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Rarely</th>
<th>Neutral</th>
<th>Often</th>
<th>Always</th>
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<tr>
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</table>
2. What other sources of information, besides what is provided by the school psychologist or the assessment specialist, do you find useful in determining academic needs and designing instructional interventions? Check all that apply.

___ A. Parent(s)/Guardian(s) of the student.
___ B. Other teachers of the student.
___ C. Other school personnel who have worked with the student (examples would be teaching assistants, speech pathologists, occupational or physical therapists, counselors, etc.).
___ D. Non-school professionals who have worked with the student (examples would be doctors, nurses, therapists, counselors, etc.).
___ E. Other(s) (Please specify)________________________________________

3. Do you find information that is presented at IEP meetings (other than the school psychologist’s evaluation) useful in answering the referral question(s)? Check one of the answers below.

___ A. Yes, but not as helpful as the school psychologist’s evaluation.
___ B. Yes, and it is more helpful than the school psychologist’s evaluation.
___ C. No, other information presented is not useful in answering the referral question(s)

4. If you are a regular education teacher, how do you use the learning disability evaluation data to adjust a student’s instruction in the classroom? (Please check one).

___ A. I generally do not use the learning disability evaluation data to adjust my classroom instruction for a student.

___ B. Learning disability evaluation results are useful for placement purposes, but I find I must do my own curriculum assessment to determine the student’s instructional needs.

___ C. I use the learning disability evaluation data only to adjust my expectancies for the student in completing assignments and for grading.

___ D. I use the learning disability evaluation data to plan my instructional approach in order to meet the goals and objectives stated in the student’s IEP.
5. If you are a special education teacher providing resource, inclusion or consultative services to students with learning disabilities, how do you use the learning disability evaluation data to address a student’s instructional needs? (Please check one).

_____A. The learning disability evaluation data are used only to determine eligibility for my services in special education.

_____B. I must use additional assessment data that I obtain after working with the student to determine the specific instructional approaches to be used.

_____C. I use the learning disability evaluation data to plan for the specific instructional needs of the student in my areas of responsibility on the IEP.

_____D. I use the learning disability evaluation data to develop specific instructional approaches to be used in the provision of special education services and to plan with regular education classroom teachers for adjusting instruction in their classrooms.

E. School Psychologists’ Section

1. What assessment methods do you use in the evaluation of a student with suspected learning disabilities?

_____A. Simple discrepancy method

_____B. Regression discrepancy method

_____C. Significantly below grade level in an achievement area based on curriculum-based measures.

_____D. Significantly below grade level in an achievement area and failure to respond sufficiently to remedial instruction.

_____E. A combination of the above (Check all that apply)

_____F. Other (Specify)
2. What assessment methods are mandated by your school district in the evaluation of a student with suspected learning disabilities?

_____ A. Simple discrepancy method

_____ B. Regression discrepancy method

_____ C. Significantly below grade level in an achievement area based on curriculum-based measures.

_____ D. Significantly below grade level in an achievement area and failure to respond sufficiently to remedial instruction.

_____ E. A combination of the above (Check all that apply)

_____ F. Other (Specify) ________________________________

3. Is the choice of assessment methods for identifying students with learning disabilities up to you, or is it mandated by your school district?

_____ A. The choice of assessment methods is up to me

_____ B. The assessment methods I use are mandated by my school district

4. If the assessment methods you use are mandated by your school district, please list any assessment methods that you would use if the choice were up to you (if different from what is already mandated by your school district).

_____________________________________________________________

_____________________________________________________________

5. Please list the names of assessment instruments that you use in the evaluation of a student with suspected learning disabilities (e.g., the WISC IV, Woodcock-Johnson III, etc.): ____________________________________________________________

_____________________________________________________________
6. In your experience, are the majority of teachers at your current middle school adequately trained to understand the psychoeducational assessment data you present at multidisciplinary/IEP team meetings and use it for instructional planning?

   ____ A. Yes
   ____ B. No

7. In your experience, do the majority of teachers at your current middle school use the assessment data you present at multidisciplinary/IEP team meetings to design instructional interventions for students with learning disabilities?

   ____ A. Yes
   ____ B. Yes, with consultation from the school psychologist
   ____ C. Most special education teachers can use my data to inform instruction, but not the regular education teachers
   ____ D. No, the assessment methods used at my school produce data that are useful for categorization purposes, only.
   ____ E. I’m not sure if the teachers at my school are able to use my assessment data to inform their instructional practices.
VITA

Janet Carole Cavender Witt was born in Paris, Tennessee, but soon moved to Nashville, Tennessee, where she attended Julia Green Elementary School and Hillsboro High School. At the end of her freshman year in high school, her family moved to Arlington, Virginia where she graduated from Washington-Lee High School in 1971. She then attended the University of Tennessee at Martin and served as a U.S. Congressional Intern during the summer of her junior year. She graduated in 1975 with a Bachelor of Science degree in Education (Secondary) in 1975. She received the Master of Science degree in Education (Curriculum & Instruction) from the University of Tennessee at Knoxville in 1976. She worked for several years as a counselor in mental health and agency placements before obtaining her certification in School Counseling from Lincoln Memorial University in 1998. In the August of 2000, she entered the Ph.D. Counseling Psychology program at the University of Tennessee at Knoxville. In spring of 2002, she was accepted into the Applied Educational Psychology Ph.D. program and switched her program of study. She completed the doctoral program in Applied Educational Psychology in August of 2007.