



Student Intervention Team Process for CLD Students

*A document to guide intervention and assessment planning
for Culturally and Linguistically Diverse (CLD) Students*

The purpose of this document is to address questions or concerns regarding the educational progress of a student from a Culturally and Linguistically Diverse (CLD) background. This document is designed to collect and analyze the most essential data to inform intervention, assessment, and support for CLD students across all tiers of support. The term CLD includes students who have a language other than English in their background (whether or not they are receiving English as a Second Language services); students who come from diverse cultural, social, and economic backgrounds; and students who come from homes where a dialect other than “standard English” is spoken.

Portland Public Schools is committed to eliminating possible misidentification of our Emerging Bilinguals (EBs, aka English Learners) and CLD students in Special Education. This process helps ensure that all necessary cultural and linguistic factors have been considered in all stages of instruction, intervention, and assessment before a Special Education referral is suggested.

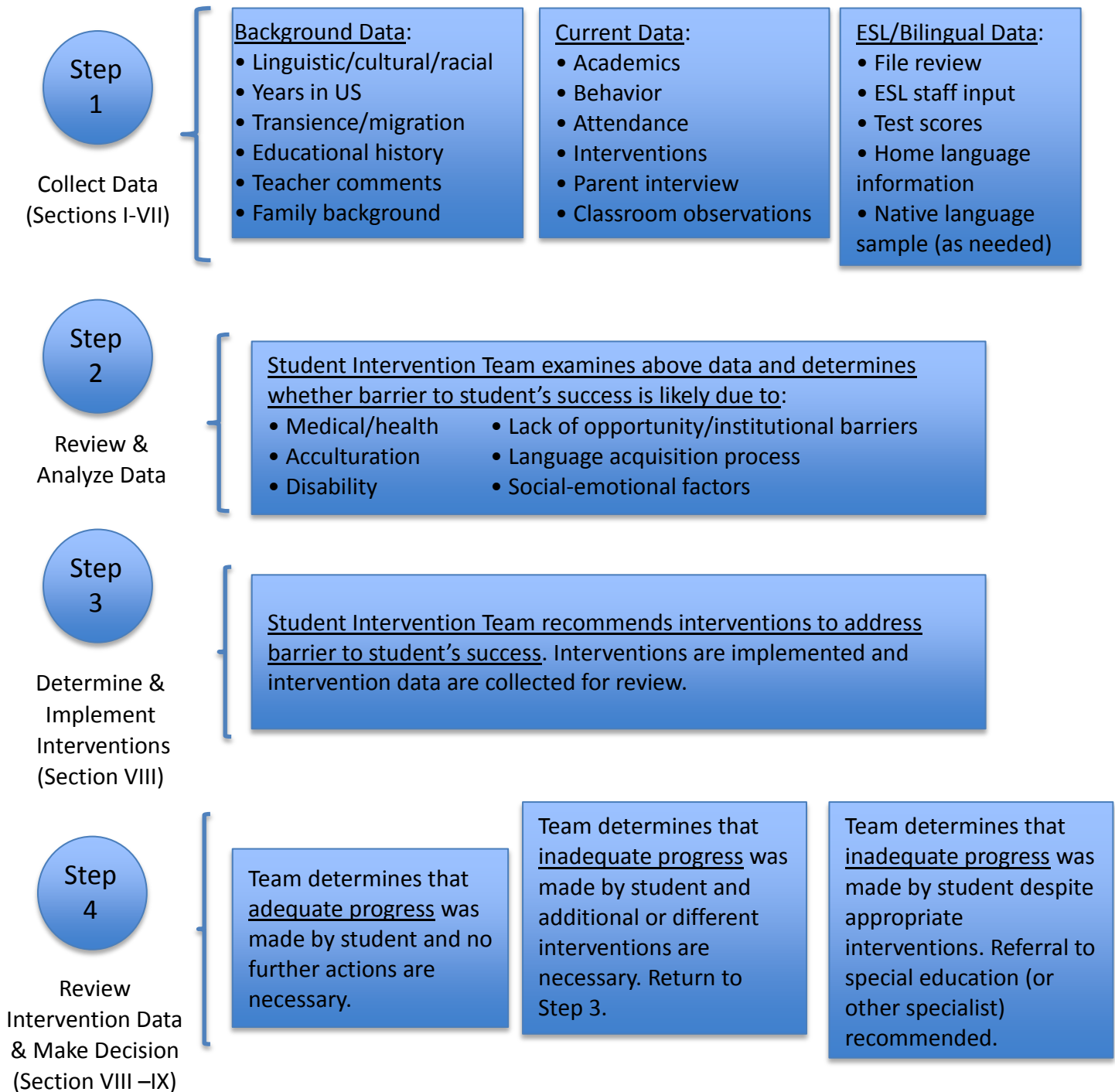
To complete this document, referring General Education teachers, and/or ESL teachers collaborate as members of the Student Intervention Team (i.e. Student Study Team, Building Screening Committee, etc.). Other team members may include but are not limited to: Principal, Assistant Principal, Counselor, Bilingual Teacher, SPED staff.

Before beginning this process, teams should consult a variety of resources (e.g., cultural liaisons, EAs, Community Agents, ESL-SPED TOSAs, multicultural resources, etc.) to familiarize themselves about the CLD student’s home language and culture.



Steps in CLD Student Intervention Team Process

While intervention data should be collected in all cases, a direct referral to Special Education may be necessary in unique and obvious cases, e.g., traumatic brain injury, physical disabilities, Down Syndrome, blindness, deafness, clinical diagnoses, etc.



I. General Student Background

Student's Name

Racial Background	Language(s) Spoken	Student ID	DOB	Age	Grade

School	Team Member Names and Titles	Meeting Dates
		Initial: _____ Review: _____ Review: _____

II. Language/Culture/Family Information

- Date input was obtained via [ethnographic-style interview](#) with parent or [interpreter](#): _____
- Mother's 1st language (L1) _____ mother's 2nd language (L2) _____
Father's L1 _____ L2 _____
- Language(s) or dialect(s) spoken to student a.) at home in the morning: _____
b.) at school: _____ c.) at home after school: _____
- Language(s) or dialect(s) student speaks a.) with parents/guardian _____
b.) with sibling(s) _____ c.) with friends _____
- When was the L2 introduced to the student? _____
- Has the student had academic instruction in another language? Yes No
If so, what language? _____ When/Where? _____ How long? _____
- What are the student's strengths? _____
- Has the student's development and/or learning seemed **significantly different or delayed when compared to siblings, family members or other bilingual peers**? Yes No
If so, how? (check all that apply)

_____ Language/Speech	_____ Academics	_____ Social Skills/Behavior
_____ Medical/Health	_____ Vision/Hearing	_____ Motor (Gross/Fine)

If yes, ask family to describe experience and related concerns.
- Have there been any significant events or major changes in the student's lifetime? (E.g., prematurity, low birth weight, birth trauma, injuries, lead/toxic exposure, refugee experience, homelessness, emotional trauma, frequent moves, deaths, etc.) Yes No
If yes, ask family to describe experience(s) and related concerns.
- Share differences the family notices between home and school culture (e.g., communication style, discipline, gender expectations, religious views, etc.) and how the differences impact the student at school.

III. Educational History

*For students in a Dual Language program, what is the model?

Experience in US Schools

90/10

50/50

Native Literacy

Age started	# of interruptions	# of schools attended since KG	Language(s) of Instruction*
Check each grade completed in US			
<input type="checkbox"/> PreK	<input type="checkbox"/> KG	<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
<input type="checkbox"/> 11	<input type="checkbox"/> 12		
Absences			
Previous Special Education services:			

Experience outside US Schools

Age started	Explain interruptions/changes (e.g., refugee, immigration, etc.)	Language(s) of Instruction
Check each grade completed outside US		
<input type="checkbox"/> PreK	<input type="checkbox"/> KG	<input type="checkbox"/> 1
<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
<input type="checkbox"/> 11	<input type="checkbox"/> 12	

IV. ESL Data Review

Years of English Exposure to Date: _____

How to access English as a Second Language data on Synergy:

1. Go to <http://inside.pps.k12.or.us/>
2. Select Synergy (in drop down menu where ORSPED is found)
3. Enter your username and password (same as email but without pps.net)
4. Click on tree icon on upper left corner
5. Select "Synergy SIS" under Quick Launch
6. Select "Student"
7. Scroll down to select "Student" again
8. When blank screen appears, insert student's name and hit enter
9. On left column, select "Student Programs"
10. Select "ELL Assessments." This will automatically give you student's current status and program of instruction (ESL, Content Based ELD, etc.). Under student's name you may select "Assessments" for details on ELPA and IPT history.

School Year(s)	Type of ESL Support (ELD class, Sheltered Instruction, Content Based ELD, Monitored Status, etc.)	Grade Received

Date Test Given	ESL Measure used (IPT, ADEPT, ELPA, SOLOM, etc.)	Score/Result

V. Achievement and Behavioral Profile

Is instruction appropriate for student's language proficiency level and cultural background?

Yes No Not sure

Performance Compared to Culturally and Linguistically Similar Peers	Please check level of concern: <i>1=low; 3=moderate; 5=high</i>		Is progress being made when compared to CLD peers?
	Skills in Home Language/Dialect: (Leave blank if not sure)	Skills in Language of Instruction:	
A. Academic Skills			
1. Aural comprehension (listening)	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
2. Oral language (speaking)	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
3. Reading comprehension	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
4. Reading word attack skills	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
5. Written language	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
6. Math computation	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
7. Math problem solving	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
8. Math concepts	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Behavior			
1. Peer interactions	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
2. Adult interactions	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
3. Independent work skills	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
4. Cooperation in groups	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
5. On-task/attentive behaviors	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
6. Adherence to rules	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Developmental Motor, physical, or coordination skills	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5	<input type="checkbox"/> yes <input type="checkbox"/> no

VI. Discipline Review

Grade	# of Office Discipline Referrals (ODRs)	# of Days In-School Suspension	# of Days Suspended	Delayed Expulsion (yes or no)	# of Days of Expulsion
PreK					
KG					
1 st					
2 nd					
3 rd					
4 th					
5 th					
6 th					
7 th					
8 th					
9 th					
10 th					
11 th					
12 th					

VII. Educational Data to Review

Use the following table to analyze educational data and student's progress in area(s) of concern. Attach and review assessment results that are pertinent to concerns (e.g., DIBELS, IDEL, easyCBM, OAKS/Smarter Balanced, Phonics Survey, Kindergarten Assessment, etc.). Data may be accessed via Synergy, Data Wall, or Dashboard.

Assessment/Data	Date/Grade	Result/Score	Benchmark
	Date _____ Grade _____	_____ %ile/Score/Level	Met _____ Not met _____
	Date _____ Grade _____	_____ %ile/Score/Level	Met _____ Not met _____
	Date _____ Grade _____	_____ %ile/Score/Level	Met _____ Not met _____
	Date _____ Grade _____	_____ %ile/Score/Level	Met _____ Not met _____

VIII. Intervention Planning & Review

Is intervention culturally and linguistically appropriate?

Yes No Not sure

Based on above data, the team determined that _____ (student) is/was not meeting benchmarks in Behavior Reading Writing Math Other: _____ due to _____

(hypothesis). Therefore, the interventions below will be/were implemented and results are as follows:

Describe Intervention*	Dates & Duration	Provider/Staff Member	Results

*Be sure to tailor intervention to specific (not general) area of concern, e.g., decoding vs. reading fluency, math calculation vs. math story problems, language of instruction at Dual Language school, etc.

IX. Summary (Team Decision)

- A. ____ This student appears to be responding to instruction and interventions; referral for further evaluation is not necessary at this time.
- B. ____ Additional information is needed (e.g., interview with parent, medical file review, data from cultural liaison, native language/dialect data, etc.).
Please describe: _____
Date information will be reviewed: _____
- C. ____ Based on student's response to intervention(s) that were provided, additional interventions will be implemented for the next ____ weeks.
Please describe: _____
Date information will be reviewed: _____
- D. ____ Student did not respond to intervention(s) to the expected degree when compared to true peers. Therefore, student is referred for Special Education evaluation.
Specific area(s) of evaluation: _____
Was the student found eligible for SPED after the evaluation? Yes No
(If yes, include this CLD SIT Process document with SPED eligibility paperwork.)

When completed, please place this packet in student's cumulative file.

X. Resources on Bilingual Populations

Information on these topics is currently available:

Acculturation/Assimilation
Bilingualism
Culturally Responsive Instruction
Culture
Dialect
English as a Second Language
Internationally Adopted Children
Language
Language Immersion
Local Counseling Resources
Refugee Populations
Second Language Acquisition

Please contact your building's TOSAs if you have comments or questions about this process, need extra support, or would like specific resources.