

Implementation Phase: **SAMPLE** Progress Review Meeting Form Approach B

PURPOSE

The purpose of this tool is to provide a sample template for use during a Progress Review meeting. This tool is flexible in that it can be used at both the Tier 2 and Tier 3 support levels.

DIRECTIONS:

Complete this form during a Tier 2 or Tier 3 Progress Review meeting and/or in consultation with a student support provider, to document the level of progress that was made toward the goal(s) identified on the *Student Support Plan*.

Progress Review Meeting Form		
Staff Member: <i>Teacher B</i>	Student: <i>Anisha B.</i>	Grade: <i>7th</i>
<p>GOAL #1: By 12/3/21, Teacher B will increase their capacity to proactively support the student's social-emotional needs as well as improve their effectiveness in implementing the predicting and questioning comprehension strategies.</p> <p>Level of Progress: <input type="checkbox"/> None <input type="checkbox"/> Very Little <input checked="" type="checkbox"/> Some <input type="checkbox"/> Significant</p> <p>Evidence/Data: <i>The teacher met with both the instructional coach and the school counselor. The comprehension strategies were introduced to Anisha's reading group, and based on the comprehension quiz, Anisha is starting to show benefit from the use of these strategies. The students were introduced to both the proactive calming strategies and the non-academic interactions. The calming strategies were not yet put into practice; students had an opportunity to interact with them.</i></p> <p>Notes:</p> <p>New Goal? <i>Goal will remain the same</i></p> <p>New Support? <i>Support will remain the same</i></p>		<p>Review Date: <i>12/3/21</i></p> <p>Status of Plan <i>Check all that apply:</i></p> <p><input checked="" type="checkbox"/> Continue</p> <p><input type="checkbox"/> Modify</p> <p><input type="checkbox"/> Discontinue</p> <p>Next Steps</p> <p><input type="checkbox"/> Refer to Tier 2 Meeting</p> <p><input type="checkbox"/> Refer to Tier 3</p> <p><input type="checkbox"/> Mental Health Partner Referral</p> <p><input type="checkbox"/> Other: (referral to school's mental health team, referral to a community partner, referral for special education services, etc.)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<p>GOAL #2: By 12/3/21, Anisha will learn and utilize 1-2 additional coping strategies to reduce/manage difficult emotions as evidenced by verbal reports and usage from the student and student support staff member working with her.</p> <p>Level of Progress: <input type="checkbox"/> None <input checked="" type="checkbox"/> Very Little <input type="checkbox"/> Some <input type="checkbox"/> Significant</p> <p>Evidence/Data: <i>The counselor has met with Anisha a few times and is continuing to build a relationship with her. This is a necessary step in the process.</i></p> <p>Notes: <i>The counselor has begun talking with Anisha about feelings and their impacts on functioning and the brain. The next step will be for the counselor to work with Anisha on selecting coping strategies that appeal to Anisha.</i></p> <p>New Goal? <i>Goal will remain the same</i></p> <p>New Support? <i>Support will remain the same</i></p>		<p>Next Review Date (if applicable): <i>1/21/22</i></p>

GOAL #3: By 12/3/21, Anisha will improve in her reading comprehension by 20% as measured by reading comprehension quizzes through using predicting and questioning strategies. Level of Progress: <input type="checkbox"/> None <input type="checkbox"/> Very Little <input checked="" type="checkbox"/> Some <input type="checkbox"/> Significant Evidence/Data: There is evidence of Anisha responding to the use of the reading comprehension strategies. Not only is she excited that the strategies help her better understand the text, on a progress monitoring assessment, Anisha scored 10% better than she did on the baseline assessment. Notes: New Goal? <i>Goal will remain the same</i> New Support? <i>Support will remain the same</i>		
Progress Review Meeting Form (for subsequent review meeting)		
Staff Member:	Student:	Grade:
GOAL #1: Level of Progress: <input type="checkbox"/> None <input type="checkbox"/> Very Little <input type="checkbox"/> Some <input type="checkbox"/> Significant Evidence/Data: Notes: New Goal? New Support?		Review Date: Status of Plan <i>Check all that apply:</i> <ul style="list-style-type: none"> • Continue • Modify • Discontinue Next Steps <ul style="list-style-type: none"> • Refer to Tier 2 Meeting • Refer to Tier 3 • Mental Health Partner Referral • Other: (referral to school's mental health team, referral to a community partner, referral for special education services, etc.) <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
GOAL #2: Level of Progress: <input type="checkbox"/> None <input type="checkbox"/> Very Little <input type="checkbox"/> Some <input type="checkbox"/> Significant Evidence/Data: Notes: New Goal? New Support?		
GOAL #3: Level of Progress: <input type="checkbox"/> None <input type="checkbox"/> Very Little <input type="checkbox"/> Some <input type="checkbox"/> Significant Evidence/Data: Notes: New Goal? New Support?		Next Review Date (if applicable):