Kansas leads the world in the success of each student.
Acknowledgments

To ensure that many Kansas voices were heard in the development of this handbook, the Kansas State Department of Education engaged a diverse group of individuals with expertise in reading difficulties and dyslexia to develop this document. We would like to acknowledge the following individuals for their contributions to this dyslexia handbook:

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# DYSLEXIA HANDBOOK

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</table>
Introduction

The Kansas State Department of Education's Dyslexia Handbook was developed to provide guidance and information to a broad spectrum of educators and stakeholders. Specifically, this publication is a response to the Kansas Legislative Task Force on Dyslexia and its recommendations. Many students in Kansas continue to struggle with reading despite being provided the learning opportunities necessary to become successful readers. Reading, writing or spelling difficulties may be caused by dyslexia or characteristics of dyslexia. The vision of Kansas education is to “lead the world in the success of each student.” With this vision in mind, this handbook seeks to foster an understanding of dyslexia and related challenges to reading. This manual explains how to identify and educate students with dyslexia. This manual also informs educators and families about practices that support students with dyslexia and other reading difficulties. This manual also informs educators and families about practices that support students with dyslexia and other reading difficulties.
INTRODUCTION | DYSLEXIA HANDBOOK

The purpose of the KSDE Dyslexia Handbook is to provide procedures to be used by school districts, administrators, specialists, teachers, higher education faculty, students and parents/guardians in early identification of instruction for, and accommodations for students who struggle to read, have characteristic of dyslexia or students with dyslexia. This handbook will be used by school districts for developing written procedures, instructional methodologies, and evidence-based practices regarding students who struggle to read, have characteristic of dyslexia or students with dyslexia. Kansas school districts have considerable autonomy in making decisions about diagnostic tools and instructional programs. KSDE does not endorse specific diagnostic tools or instructional programs. The programs in this handbook, therefore, are recommended and not mandated.

About 15-20% of our population have characteristics of dyslexia, which could include inaccurate or slow reading, poor spelling, poor writing or mixing up words that are similar.


Not all children who have these symptoms have dyslexia, but they are likely to struggle with many aspects of academic learning and are highly likely to benefit from systematic, explicit instruction in reading and writing. Dyslexia occurs in people of all backgrounds and intellectual levels. People with dyslexia can be very intelligent and are often capable or gifted in the arts, computer science, mathematics, engineering, sales and sports. Also, research indicates that dyslexia is hereditary; parents with dyslexia are very likely to have children with dyslexia.1 Kansas children may struggle in learning to read for many different reasons. Some reasons for this could include weak oral language development in the early years, growing up in a family that has faced economic hardships, weak skills in the English language, low general intellectual ability or lack of motivation and interest. 2 The good news is that human brains are malleable and with evidence-based screening practices, evidence-based literacy instruction, and ongoing progress monitoring, reading improvement is possible.

DYSLEXIA HANDBOOK

References


Sample Scope and Sequence of Phonogram Instruction

* Structured literacy instruction is systematic and cumulative. This is a sample document and should be considered an illustration of possible skill sequence. This is not a comprehensive sample.

**Beginning Level**
- /a/ /b/ /c/ /d/ /e/ /f/ /g/ /h/ /i/ /j/ /k/ /l/ /m/ /n/ /p/ /q/ /r/ /s/ /t/ /u/ /v/ /w/ /x/ /y/ (consonant)
- Ending rimes - all, -ing, -ong, -ang, -en, -ed, -ing, -ion, -tion
- Prefixes - un-, mis-, in-, non-, pre-, re-

**Middle Level**
- /r/-controlled vowels - ar, or, er, ur
- Suffixes -es, -er, -est, -ly, -y, -ful, -less, -en, -ment
- Prefixes - sub-, mis-, mis-
- Concepts - diphthong, compound word, base word tense (present, past), singular, plural, contraction
- Syllable types - r-controlled, vowel teams

**Intermediate Level**

**Advanced Level**
- Vowel sounds - ei, egh, ey, schwa
- Silent letters - wr (wreck), kn (knee), gh (ghost), mb (lamb)
- Pre-, pre-, pro-
- Latin Roots - cept, dict, duct, fort, ject, port, rupt, saps, spect, vert, flex, fic
- Latin Roots - sui, mis, pos, plic, scrib, vis
- Syllable types consonant- e

**Dyslexia Defined**

Dyslexia is a specific learning disability that is neurological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge.

Characteristics of Dyslexia

The following are the predominate reading/spelling characteristics of dyslexia:

- Difficulty reading words in isolation.
- Difficulty accurately decoding unfamiliar words.
- Difficulty with oral reading (slow, inaccurate or labored without prosody).
- Difficulty spelling.

It is important to note that individuals demonstrate differences in degree of impairment and may not exhibit all the characteristics listed above. The reading/spelling characteristics are most often associated with the following:

- Segmenting, blending and manipulating sounds in words (phonemic awareness).
- Learning the names of letters and their associated sounds.
- Holding information about sounds and words in memory (phonological memory).
- Rapidly recalling the names of familiar objects, colors or letters of the alphabet (rapid automatic naming).

Consequences of dyslexia may include the following:

- Variable difficulty with aspects of reading comprehension.
- Variable difficulty with aspects of written language.
- Limited vocabulary growth due to reduced reading experience.

Critical Screening Elements

* Screening products listed are those approved entirely by school districts. KSDE plays no part in advising or approving local assessments. The products are listed here merely as courtesy examples of assessments used. This list is not complete or exhaustive.

<table>
<thead>
<tr>
<th>Screening component</th>
<th>Grade levels to be screened</th>
<th>Other subtests that may measure this</th>
<th>Products approved by school districts.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letter Naming Fluency (LNF)</td>
<td>Kindergarten: Fall (F), Winter (W), Spring (S)</td>
<td>- Letter Sound Fluency</td>
<td>- DIBELS 8th Ed.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Word Reading Fluency</td>
<td>- FASTBridge</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Sight Word Fluency</td>
<td>- AIMS+</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- First Sound Fluency</td>
<td>- easyCBM</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Phoneme segmentation</td>
<td>- StarCBM</td>
</tr>
<tr>
<td>Letter Word Sound Fluency (LWSF)</td>
<td>Kindergarten and Fall 1st Grade</td>
<td></td>
<td>- DIBELS 8th Ed. (NWF, WRF)</td>
</tr>
<tr>
<td></td>
<td>- Kindergarten: F, W, S 1st grade: F</td>
<td></td>
<td>- AIMS+ (LWSF, NWF)</td>
</tr>
<tr>
<td></td>
<td>- Grade 1: F, W, S</td>
<td></td>
<td>- easyCBM (L, S, WRF)</td>
</tr>
<tr>
<td></td>
<td>- Grade 2: F</td>
<td></td>
<td>- StarCBM</td>
</tr>
<tr>
<td>Phoneme Segmentation Fluency (PSF)</td>
<td>Kindergarten First Grade</td>
<td>- Word segmenting</td>
<td>- DIBELS 8th Ed.</td>
</tr>
<tr>
<td></td>
<td>- Kindergarten: W, S</td>
<td>- Phoneme segmentation</td>
<td>- Acacidence</td>
</tr>
<tr>
<td></td>
<td>- Grade 1: F, W, S</td>
<td></td>
<td>- FASTBridge</td>
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<tr>
<td></td>
<td>- Grade 2: F</td>
<td></td>
<td>- AIMS+</td>
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<tr>
<td></td>
<td>- Grade 2: F</td>
<td></td>
<td>- easyCBM</td>
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<tr>
<td></td>
<td>- Grade 2: F</td>
<td></td>
<td>- StarCBM</td>
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<tr>
<td>Nonsense Word Fluency (NWF)</td>
<td>Grades K-2</td>
<td></td>
<td>- DIBELS 8th Ed.</td>
</tr>
<tr>
<td></td>
<td>- Kindergarten: S</td>
<td></td>
<td>- Acacidence</td>
</tr>
<tr>
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<td></td>
<td>- Grade 2: F</td>
<td></td>
<td>- AIMS+</td>
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<td></td>
<td>- Grade 2: F</td>
<td></td>
<td>- easyCBM</td>
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<tr>
<td></td>
<td>- Grade 2: F</td>
<td></td>
<td>- StarCBM</td>
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<td>Oral Reading Fluency (ORF)</td>
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</tr>
<tr>
<td></td>
<td>- Grade 1: W, S</td>
<td>- Passage Reading Fluency</td>
<td>- Acacidence (Winter 1st-9th)</td>
</tr>
<tr>
<td></td>
<td>- Grade 2-5: F, W, S</td>
<td></td>
<td>- FASTBridge (1st-12th)</td>
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<tr>
<td></td>
<td>- Grade 2-5: F, W, S</td>
<td></td>
<td>- AIMS+ (1st-12th)</td>
</tr>
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<td></td>
<td>- Grade 2-5: F, W, S</td>
<td></td>
<td>- easyCBM (1st-6th)</td>
</tr>
<tr>
<td></td>
<td>- Grade 2-5: F, W, S</td>
<td></td>
<td>- StarCBM</td>
</tr>
<tr>
<td>Comprehensive Measure (Kansas MTSS recommendation)</td>
<td>Grades 6-12, used as a “gate” to determine if ORF should be given to students demonstrating risk in grades 6-12.</td>
<td>- Reading</td>
<td>- DIBELS 8th Ed. (2nd-8th)</td>
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<tr>
<td></td>
<td>- Maze</td>
<td>- Reading Comprehension</td>
<td>- Acacidence (3rd-9th)</td>
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<td></td>
<td>- Dave</td>
<td>- Multiple Choice Reading comprehension</td>
<td>- AIMS+ (2nd-12th)</td>
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<td>- Reading Comprehension</td>
<td>- FASTBridge (1st-12th)</td>
<td>- easyCBM (2nd-6th)</td>
</tr>
<tr>
<td></td>
<td>- Multiple Choice Reading comprehension</td>
<td>- STAR Reading (9th-12th)</td>
<td>- NWEA MAP (9th-12th)</td>
</tr>
</tbody>
</table>

* NWF see page 35 for more information regarding 2nd grade.

For the most up-to-date information, please refer to the KSDE Dyslexia webpage. 38

Characteristics by Grade Level

Individuals with dyslexia have trouble with reading, writing, spelling and/or math even though they have the ability to learn and have had many exposures to the content. The following characteristics identify risk factors associated with dyslexia at different grade levels or stages of life. If the following characteristics are unexpected for an individual's age, educational level or cognitive abilities, they may be at risk for dyslexia. A person with dyslexia usually has several of these characteristics that persist over time. The list below was compiled from resources from the International Dyslexia Association:

**PRESCHOOL**
- Delays in learning to talk.
- Difficulty learning to pronounce new vocabulary.
- Difficulty following multistep directions.
- Difficulty retelling a familiar story in order.
- Difficulty with rhyming.
- Difficulty pronouncing words.
- Poor auditory memory for knowing rhymes or chants.
- Inability to recall the right word when speaking.
- Trouble learning and/or remembering the letters in his/her name.

**KINDERGARTEN AND FIRST GRADE**
- Problems with many of the previously described characteristics along with the following:
  - Difficulty breaking words into smaller parts or breaking words into syllables (e.g., "sunflower" can be broken into three syllables "sun," "flow" and "er").
  - Difficulty identifying and manipulating sounds in one syllable words (e.g., "bat" can be broken into the sounds of /b/ /a/ /t/).
  - Difficulty remembering the names of letters of the alphabet and recalling the sounds associated with those letters.
  - Difficulty reading single words.
  - Difficulty spelling words the way they sound or remembering letter sequences in very common words often seen in print (e.g., "the," "and," etc.).

**SECOND AND THIRD GRADE**
- Individuals could have problems with many of the previously described characteristics along with the following:
  - Difficulty recognizing common high frequency words (e.g., "been," "said").
  - Difficulty decoding single words, including nonsense words.
  - Difficulty organizing written language.
  - Difficulty copying from provided text.
  - Difficulty recalling the correct sounds for the letters and letter patterns in reading.
  - Difficulty connecting speech sounds and appropriate letter or letter combinations and omitting letters in words for spelling (e.g., "later" spelled "lettr").
  - Difficulty reading fluently (e.g., reading slow, inaccurate, and/or without expression).
  - Reliance on picture clues, story theme or guessing at words while reading.
  - Difficulty with written expression.

---

**Nonsense Word Fluency (NWF)**
A one-minute timed assessment that assesses the student’s ability to utilize the alphabetic principle. The alphabetic principle is the ability to associate sounds with letters and use these sounds to form words; therefore, the alphabetic principle is a prerequisite to word identification. It has two parts: alphabetic understanding and phonological blending. In alphabetic understanding, letters represent sounds in words. In phonological blending, letter sounds can be blended together; and knowledge of the systematic relationships between letters and phonemes can be used to read/decode words. The screener your school chooses must:

- Screen for the above skills.
- Use valid and reliable measures.
- Allow for interpretation and progress monitoring of nonsense word fluency.

If the screener being used meets the above requirements, then it is considered approved for NWF.

*If the screener your system uses does not have a valid and reliable screening tool for NWF in second grade, then follow this procedure. After giving the ORF, those students not reaching benchmark with ORF (according to your testing system) should be given the NWF. Systems would need to use the Spring 1st Grade NWF screener to those students needing further screening.*

**Oral Reading Fluency (ORF)**
A one-minute timed assessment that assesses accuracy and fluency with connected text. The ability to effortlessly translate letters to sounds and sounds to words is the hallmark of reading with automaticity. The fluent reader is one whose decoding processes are automatic, requiring no conscious attention to the details of words in the text. Such capacity then enables readers to allocate their attention to the comprehension and meaning of text. The screener your school chooses must:

- Screen for the above skills.
- Use valid and reliable measures.
- Allow for interpretation and progress monitoring of oral reading fluency.

If the screener being used meets the above requirements, then it is considered approved for ORF.
**Letter Naming Fluency (LNF)**

A one-minute timed assessment to screen the student's ability to name the letter on a page, both upper and lower case, in random order. Letter naming fluency identifies a student at possible risk of reading difficulties. This measure is highly predictive of reading success through grade 1. The screener your school chooses must:

- Screen for the above skills.
- Use valid and reliable measures.
- Allow for intervention and progress monitoring of letter naming skill.

If the screener being used meets the above requirements, then it is considered approved for LNF.

**Letter Word Sounds Fluency (LWSF)**

A one-minute timed assessment to screen the student's ability to make letter sounds, make the sounds of two-letter combinations, and read aloud consonant-vowel-consonant (CVC) words. This task is similar to the general developmental progression from letter-sound correspondence to oral word of automaticity of the skills named above. The screener your school chooses must:

- Screen for the above skills.
- Use valid and reliable measures.
- Allow for intervention and progress monitoring of letter word sound skills.

If the screener being used meets the above requirements, then it is considered approved for LWSF.

**Phoneme Segmentation Fluency (PSF)**

A one-minute timed assessment that assesses the student's ability to segment three-and four-phoneme words into their individual phonemes fluently. The PSF task is similar to the general developmental progression from letter-sound correspondence to oral word reading. Letter word sounds fluency can also measure the level of automaticity of the skills named above. The screener your school chooses must:

- Screen for the above skills.
- Use valid and reliable measures.
- Allow for intervention and progress monitoring of phoneme segmentation skills.

If the screener being used meets the above requirements, then it is considered approved for PSF.
Rubric

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>All students in kindergarten were screened in Letter Naming Frequency.</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Fall (F), Winter (W), Spring (S)</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>All students in grades K-1 were screened in Letter Word Sounds.</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Kindergarten: F, W, S</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Grade 1: F</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>All students in grades K-1 were screened in Phoneme Segmentation Fluency.</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Kindergarten: W, S</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Grade 1: F, W, S</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>All students in grades K-2* were screened in Nonsense Word.</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Kindergarten: S</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Grade 1: F, W, S</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Grade 2: F*</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>All students in grades 1-5 were screened in Oral Reading Fluency.</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Grade 1: W, S</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Grades 2 - 5: F, W, S</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>All students in grades 6-12 not reading at benchmark on a nationally normed reading comprehension assessment were screened using an Oral Reading Fluency assessment.</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Was the screener reliable?</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

*NWF see Appendix A

The screening programs listed are not required or recommended screeners for dyslexia by KSDE. The screeners listed below are what most schools in Kansas use. Your system may select any screener, as long as it screens for the items in the table to the left.

<table>
<thead>
<tr>
<th>School name</th>
<th>Screener name</th>
<th>Sub-test used</th>
</tr>
</thead>
</table>

The early identification of individuals who struggle to read, have characteristics of dyslexia or with dyslexia, which includes early intervention, will have a significant impact on their future academic success. Screening tools allow teachers to predict which children are at risk of reading difficulty before they begin learning to read.7

Research has shown the connections of brain growth for individual’s birth to age 8 as a critical period for literacy development.8 According to Torgesen (1998), it is imperative to “catch them before they fall” thus the importance of screening is critical in the early literacy development years.

If the persistent achievement gap between dyslexic and typical readers is to be narrowed, or even closed, reading interventions must be implemented early, when children are still developing the basic foundation for reading acquisition. The persistent achievement gap poses serious consequences for dyslexic readers, including lower rates of high school graduation, higher levels of unemployment and lower earnings because of lowered college attainment. Implementing effective reading programs early, even in preschool and kindergarten, offers the potential to reduce and perhaps even close the achievement gap between dyslexic and typical readers and bring their trajectories closer over time.

- Ferrer, et al., Achievement Gap in Reading Is Present as Early as First Grade and Persists through Adolescence, 2015

References:
7. Susan Hall, 2004
8. Naulls & Wolfe, 2009

* NWF see page 35 for more information.
What is Screening?

Screening measures are usually brief assessments of skills that are highly predictive of a later outcome. Screening should quickly differentiate students into groups—those who need targeted intervention and those who do not. A screening measure needs to focus on specific skills of reading. Tools used for screening should have the following characteristics:

• Quick and targeted assessment of discrete skills.
• Alternative equivalent forms (for administration more than one time per year).
• Standardized protocols for test administration and scoring.
• Reliability and validity.

Research continues to support the need for early identification and assessment. Characteristics associated with reading difficulties are connected to spoken language. Difficulties in young children can be assessed through screenings of phonemic awareness and other phonological skills. It is essential to screen students for dyslexia and related reading disorders early in their academic life. Screening can serve multiple purposes for reading instruction including: determining a student’s risk for dyslexia and other reading difficulties, assisting in creating data-based decisions for intervention instruction, and to aid in determining if progress is adequate or if a different intervention is required.

Why Conduct a Screening?

Screening results should identify specific students who could be at risk for reading difficulties. Research states that early intervention for students with reading difficulties is critical for intervention to be successful. “Deficits in phonological awareness, rapid automatized naming, verbal working memory and letter knowledge have been shown to be robust precursors of dyslexia in children as young as age three.” In their book, “Straight Talk About Reading,” Susan Hall and Louisa Moats (1999) state that, “Inexpensive screening measures identify at-risk children in mid-kindergarten with 85 percent accuracy.”

Dyslexia is defined as “a specific learning disability that is neurological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge.”

- International Dyslexia Association, 2002

APPENDIX C

Screening Tool Rubric

Overview

The path to leading the world in the success of each student depends on the ability to read at grade level. When students enter kindergarten, teachers should be keenly aware of each child’s oral language ability and ability to learn the written language of English. Dyslexia is defined as “a specific learning disability that is neurological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge.”

- International Dyslexia Association, 2002

In accordance with the Kansas State Board of Education vote in November 2019, all schools must screen students for dyslexia or characteristics of dyslexia. Common characteristics around reading that some children may display include: segmenting, blending, and manipulating sounds, learning names of letters and their associated sounds, holding information about sounds and words in memory, rapidly recalling the names of letters of the alphabet. All of these characteristics impede a student’s ability to comprehend written text at grade level.

The early identification of individuals with characteristics of dyslexia will have a significant impact on their future academic success. Therefore, it is imperative that we catch them before they fail through the screening process.

KSDE has developed this rubric to help schools adhere to the recommendations set forth by the State Board of Education. This completed rubric shall be published and used in accountability measures in KESA and for EOYA reporting.

Screening tools must be reliable and valid to identify students at risk of reading difficulties. Reliable screeners refer to the consistency with which a tool classifies from one administration to the next. A tool is considered reliable if it produces the same results when administering the test under different conditions, at different times, or using different forms of the test. Validity is a measure of how well a given scale measures what it actually intends to measure, leaving nothing out and including nothing extra. In the case of reading screeners, it is validity that indicates how completely and accurately the assessment captures the reading performance of all students who take it.
Types of Assessment

Assessments have multiple purposes. Universal screening is conducted to determine a student’s risk for reading difficulty and the need for possible instructional intervention. Once the universal screening is complete, the data is to be analyzed for areas of weakness as it relates to reading competencies. If areas of weakness are identified, then an informal diagnostic assessment may be administered so that a data-based intervention plan can be created to address the identified weakness(es) in reading. If a student has an intervention plan, then ongoing progress monitoring assessments (i.e., intervention assessments) should be conducted to evaluate the impact of the instruction and the student’s achievement towards reading goals.

Universal Screeners

Universal screening tools are quick and targeted assessments of distinct skills that indicate whether students are making adequate progress in reading achievement. Universal screeners are to be administered to all students in kindergarten through 12th grade at a minimum of three times per year and serve as your progress monitoring tool for all students. Since research has shown the rapid growth of the brain and its response to reading instruction in the primary years, the critical time for initial universal screening would be when a student is in preschool or kindergarten. Additionally, Eden (2015) states that “when appropriate intervention is applied early, it is not only more effective in younger children, but also increases the chances of sparing a child from the negative secondary consequences associated with reading failure, such as decline in self-confidence and depression.” Universal screeners should have alternate equivalent forms so that they can be administered at least three times per year with unique questions each time. There should be standardized directions for administration and scoring of these assessments. Finally, universal screeners should have established reliability and validity measures.

Screening Flowchart

Resources:
- MTSS Problem-Solving Decision Tree, https://drive.google.com/file/d/1b0z75c/Nbu4hvFZuxbENxgR6zv7i3kh8/View

Informal Diagnostics

Upon completion of the universal screener, student data should be analyzed for areas of weakness, as it relates to the reading competencies. In order to isolate the areas of reading in need of intervention, an informal diagnostic instrument may need to be utilized. In some cases, the universal screener is able to isolate the area in need of reading intervention. When the universal screener does not identify the target area, an informal diagnostic could be used. Informal diagnostic assessments should focus on measuring the language/reading skills that influence reading outcomes (i.e., phonic awareness, phonics, fluency, vocabulary, and comprehension). Informal diagnostic assessments take more time to administer and should only be given to students at risk. Based on results of the informal diagnostic assessment, intervention plans should be developed by the teacher, or a student intervention team, utilizing evidence-based practices to influence reading competency development. During the course of the intervention, assessment data should be collected and examined.

Progress Monitoring

Intervention assessment data, gathered through the progress monitoring tool of your universal screener, reveals how students have performed on skill progress. The intervention process is entirely driven by data, characterized by increased intensity and individualization of reading deficits. Progress monitoring is a key component of an intervention plan. Prior to delivering the intervention instruction, school teams should develop a progressing monitoring plan which outlines the progress monitoring instructional tool, student goal, and frequency of data collection and review. During delivery of the intervention instruction, educators should collect and graph frequent progress monitoring data. After sufficient data is collected, it is graphed and evaluated against the student’s instructional goal to determine whether the student is making satisfactory progress. If progress toward the student’s instructional goal is evident, the teacher continues to implement the intervention. However, if the student’s progress is unsatisfactory, the teacher should consult with team members to determine how to intensify or change the instructional intervention.

What is the difference between a Universal Screener and other assessments we give in our district?

While state assessments and other achievement measures look at summative growth, screeners are designed to be quick assessments that are easy to administer. Screeners provide evidence-based practices to influence reading competency development. During the course of the intervention, assessment data should be collected and examined.

A good universal screener should be available in multiple forms so progress monitoring can occur to determine if those instructional adjustments are closing the gap for each student. A rubric outlining the other important components of a strong universal screener, along with a list of assessments currently being used in Kansas schools that fit those requirements, is available in a document on the KSDE website titled “Dyslexia Screening Rubric.”

Does this mean that by the screener are dyslexic and need special education services?

The short answer is no. Just like high blood pressure signals potential for health concerns, a student who the screener identifies as below benchmark is potentially at risk for not developing as a proficient reader. The screening data allows a school to respond immediately with evidence-based interventions that address reading deficits, with or without an official diagnosis, and regardless of whether the student has been identified as an exceptional learner.

We’ve given the screener to students. Now what?

The flowchart on the following page gives a visual pathway for schools to use the universal screening data and respond appropriately for each student based on the results of their screening assessment. Students who score within the benchmark range are considered on track for continuing to develop as proficient readers. Students who score below benchmark, however, are demonstrating a need for some sort of skill-based intervention. In some cases, additional informal diagnostics – for example, but not limited to, a Quick Phonics Screener (QPS) or a Phonological Awareness Skills Test (PAST) – may be needed to determine what specialized instruction a particular student may need. When assessment data is used to make instructional decisions, there needs to be a high degree of reliability in the measurement. Teacher-created instruments do not qualify as an informal assessment instrument that is valid and reliable.

Screeners are simply part of the general education intervention (GEI) process and districts will want to identify this when asked about their GEI system. As always, districts are tasked through Child Find to refer any student for an evaluation should they suspect an exceptionality.

Where can I go for more information about selecting and/or using a screener effectively?

The Kansas Department of Education has released several documents that can be helpful. In addition, KSDE staff members are just an email away. Districts should contact Cindy Hadicke for more information.

Kansas State Department of Education | www.ksde.org
Criteria for Dyslexia Screening Tools

KSDE requires that all accredited school systems in Kansas provide dyslexia screening to all students in kindergarten through 12th grade. It is important that the screening tool be accurate and comprehensive. However, it should be noted that these screenings are not as extensive as a comprehensive evaluation. While the school selected screening instrument will be expected to measure skills, it is important that individuals who administer the screening instrument observe and take anecdotal notes on students’ behaviors (listed below) during the administration of the screener. This is not an exhaustive list, but some key red flags that may require more detailed diagnostic assessment are:

- Lack of automaticity.
- Difficulty sounding out words left to right.
- Guessing.
- Inability to focus on the reading task.
- Avoidance behavior.

Screening is not a formal evaluation. The results of the screenings conducted in schools across Kansas should be utilized to determine each individual student’s need for immediate and timely intervention as recommended by the Kansas Multi-Tiered System of Supports. Students who score below benchmark on the screening tool may need to be further assessed in the skills listed below (Gersten, et al., 2008):

- Phonological awareness
- Phonemic awareness
- Sound-Symbol recognition
- Nonword Reading (pseudo word reading)
- Decoding skills
- Spelling
- Oral reading rate (second grade and above)
- Oral reading accuracy (second grade and above)

Common Screening Practices

The use of screeners is a process for gathering additional information to determine if characteristics of dyslexia are present. Schools should consider gathering additional information if a student performs below benchmark expectations. This includes other progress monitoring data, work samples, format and literacy assessment data and other assessment data which assess the skills listed above. The determination of existing characteristics of dyslexia should be based on multiple sources of data. As schools determine the timing of the selected screener, the following questions should be considered:

- Has the student had adequate time for instruction?
- How will the timing of the administration of the screener fit in with the timing of other required assessments in the school?

A school must ensure that appropriately trained and qualified individuals administer and interpret the results of the selected screening tool. Please note that an educational aide or a paraprofessional is not eligible to administer the dyslexia screening tool unless the educational aide or paraprofessional has been trained to use the assessment with fidelity or has a certification with the selected screener. Under no circumstances should an educational aide or paraprofessional interpret the results of a universal screening tool. Individuals who interpret the screening tool must be a classroom teacher who has a valid Kansas teaching license for kindergarten through sixth grade or an individual who has a valid reading specialist endorsement.

It is considered best practice that the individual who administers the screening tool be the student’s classroom teacher.
The importance of early intervention cannot be overstated. Intervening early, before difficulties become intractable, offers the best hope for successful outcomes and prevention of long-term deficits. The purpose of screening is to help identify, as early as possible, the students at risk for dyslexia or other reading difficulties so that targeted intervention can be provided. Screening alone will never improve outcomes for students. The screening must lead to effective instruction for it to be useful. Therefore, once the screening has been administered the next steps are to analyze results, identify the level of risk for each student, and make informed decisions. The next steps are broadly categorized as: continue with core instruction, implement targeted intervention, and/or refer for evaluation.

There are several important factors to consider when interpreting screening results. First, it is important to remember that there is no definitive test score that invariably identifies dyslexia. Dyslexia is a neurobiological disorder that exists along a continuum of severity. This makes the identification of dyslexia more challenging than identifying other forms of disability.

As with any assessment tool, it is important that schools administer and interpret the screening tool with fidelity. Screening tools use norm-referenced criteria to establish cut points derived by the publisher of the tool. Cut points are used to group students into categories (e.g., at risk or not at risk) based on the results of the screening tool. All accredited Kansas schools must adhere to the cut points established by the publisher of the screening instrument.

In general, students scoring below the publisher-determined cut point are considered “at risk” for reading difficulties or dyslexia. Students scoring far below the cut point should be considered at high risk for dyslexia. Students falling well below the cut point have a much higher probability of being at risk for reading difficulties or dyslexia while students scoring well above the cut point have lower probability of reading difficulties or being at risk for dyslexia. The decision for what to do next is easiest for students whose scores fall at the extreme ends of the continuum. Students falling well above the cut point can be considered at low risk for dyslexia and are much less likely to need additional intervention or evaluation. Students scoring far below the cut point should be considered at high risk for dyslexia.

For students who are identified as having reading difficulties or at risk for dyslexia, the school should provide targeted intervention provided by the appropriate staff as determined by the district. Individual districts may use instructional aides or paraprofessionals in this role only if these instructors have received specific professional development on the skill deficit and intervention protocols. It is important to note that the use of a tiered intervention process, such as the Kansas MTSS process must not be used to delay or deny an evaluation for a suspected learning disability especially when parent or teacher observations support this.

For students who score close to the cut point, more information may be needed to make an informed decision regarding implementation of targeted interventions with progress monitoring, or continuation of core instruction only. Data gathering will provide this additional information.

## APPENDIX A

### Information for Parents and Families

If you suspect your child may have dyslexia, trust yourself. You know your child better than anyone. Here are some tips and steps from the American Brain Society that you can take to find out. [https://americanbrainsociety.org/suspect-your-child-has-dyslexia-heres-what-to-do-next/](https://americanbrainsociety.org/suspect-your-child-has-dyslexia-heres-what-to-do-next/)

1. Educate yourself using trustworthy references.
2. Early intervention - Dyslexia is not something your child will naturally outgrow. The earlier the interventions are started, the more impact they will have.
3. Work closely with your child’s school - In the United States, schools have a legal obligation to create an action plan to help children with dyslexia and other learning challenges.
4. Be an advocate for your child. Stay informed, ask questions, tap into resources and know your child’s rights.
5. Keep learning fun. Find ways to make reading enjoyable.
6. Be supportive and patient. Your child looks to you for comfort, love and encouragement.
7. Focus on the bright side. Many successful and famous people are dyslexic.
8. Seek support from other parents and caregivers.
9. Find other ways for your child to shine. Get your child engaged in art, music, sports or hobbies where your child can develop confidence.

### Resources

The resources listed below may provide parents and families with more information:

- [The International Dyslexia Association](https://dyslexiaida.org/fact-sheets/)
- [Why are Dyslexia Screeners Important? from the Kansas Parent Information Resource Center](https://kahome.org)
- [Parents Guide to Dyslexia from Childmind](https://childmind.org)
- [The Yale Center for Dyslexia and Creativity](https://dyslexia.yale.edu)

Having a child who is struggling to learn to read can be confusing, and if a child is identified as having dyslexia, it can feel overwhelming. Rest assured, you are not alone and with the right instruction, almost all people with dyslexia can learn to read. It doesn’t have to stop your child from reaching their full potential.

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17. Petscher, et al., 2019

34. [https://dyslexiaida.org/fact-sheets/](https://dyslexiaida.org/fact-sheets/)
35. [https://kahome.org](https://kahome.org)
36. [https://childmind.org](https://childmind.org)
37. [http://dyslexia.yale.edu](http://dyslexia.yale.edu)
Considerations for English Language Learners

Another factor to consider when interpreting screening results is the student’s linguistic background. The nature of the writing system of a language impacts the reading process. This impacts the identification of students with dyslexia in languages other than English. Assessments for dyslexia in linguistically diverse populations must differentiate language disadvantages from reading difficulties.

**DYSLEXIA IN TRANSPARENT AND OPAQUE ORTHOGRAPHIES**

<table>
<thead>
<tr>
<th>OPAQUE (ENGLISH)</th>
<th>TRANSPARENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early and marked difficulty with word-level reading.</td>
<td>Less difficulty with word-level reading.</td>
</tr>
<tr>
<td>Fluency and comprehension often improve once decoding is mastered.</td>
<td>More difficulty with fluency and comprehension.</td>
</tr>
</tbody>
</table>

**CHARACTERISTICS OF DYSLEXIA IN ENGLISH VS. SPANISH**

<table>
<thead>
<tr>
<th>ENGLISH</th>
<th>SPANISH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phonological awareness weaknesses.</td>
<td>Phonological awareness weaknesses may be less pronounced.</td>
</tr>
<tr>
<td>Rapid Automatic Naming</td>
<td>Rapid Automatic Naming</td>
</tr>
<tr>
<td>Regular/irregular word decoding difficulties</td>
<td>Decoding fewer irregular works in Spanish.</td>
</tr>
<tr>
<td>Fluency often a key indicator</td>
<td>Fluency often a key indicator</td>
</tr>
<tr>
<td>Frequent spelling errors</td>
<td>Spelling may show fewer errors in English, but still more than students that do not have dyslexia.</td>
</tr>
<tr>
<td>Reading comprehension may be a weakness in both English and Spanish.</td>
<td>Reading comprehension may be a weakness in both English and Spanish.</td>
</tr>
</tbody>
</table>

*Research shows that early reading measures, administered in English can be used to screen English learners for reading problems. 18 Screenin should begin for ELs as soon as they enter the school system rather than following the common practice of screening ELs when they have reached a reasonable level of English proficiency. It has been consistently proven that foundational reading measures, administered in English are an excellent means for screening ELs. 19 Research supports guidance in the interpretation of phonological awareness test scores. 20 Therefore, careful consideration should be given to assessments and intervention plans for students who are culturally and linguistically diverse.

DYSLEXIA IN TRANSPARENT AND OPAQUE ORTHOGRAPHIES

Transparent written language has a close letter/sound correspondence. 18 Since English is an opaque language, one with a more complex phoneme (sound) grapheme (letter) correspondence, learning the English writing system can be challenging for English Language Learners (ELs). 19 Teachers must recognize the first language impact of their ELs students when acquiring the English opaque language system.

**APPENDICES**
Screening Flowchart

Tier I instruction and Universal Screening

Is screening data/performance on target or at benchmark?

YES

Continue Tier I instruction.

NO

Consider informal diagnostic assessment (QPS, PAST, etc.) if additional information is needed.

Tier II or Tier III intervention driven by screen and diagnostic data.

Is the gap closing?

YES

Implement revised intervention.

NO

Problem solve: Intensify or change intervention and ensure progress monitoring of correct skill and frequency.

Click here for a MTSS Problem-Solving Decision Tree.

Implement revised intervention.

Is the gap closing yet?

YES

Continue intervention.

NO

Problem solve and intensify intervention.

Consider exiting student with strategic monitoring or move student to the next skill.

* Suspect an exceptionality? Consider referring for an evaluation. Click here for KSDE Child Find guidance.

Access to the full document is available in Appendix B.

Resources:
- MTSS Problem-Solving Decision Tree [Click here](https://drive.google.com/file/d/1bdzS0CnbuUhJFZvxbENwXtdbZV3ik8/view)

23 See page 29
Screening Rubric

Access to the full document is available in Appendix C and by clicking here.

The screening programs listed are not required or recommended screeners for dyslexia by KSDE. The screeners listed below are what most schools in Kansas use. Your system may select any screener, as long as it screens for the items in the table to the left.

<table>
<thead>
<tr>
<th>School name</th>
<th>Screener name</th>
<th>Sub-test used</th>
</tr>
</thead>
</table>

### Rubric

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>All students in kindergarten were screened in Letter Naming Frequency.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Fall (F), Winter (W), Spring (S)</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>All students in grades K-1 were screened in Letter Word Sounds.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Kindergarten: F, W, S</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Grade 1: F</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>All students in grades K-1 were screened in Phoneme Segmentation Fluency.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Kindergarten: W, S</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Grade 1: F, W, S</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>All students in grades K-2* were screened in Nonsense Word.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Kindergarten: S</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Grade 1: F, W, S</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Grade 2: F*</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>All students in grades 1-5 were screened in Oral Reading Fluency.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Grade 1: W, S</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Grades 2-5: F, W, S</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>All students in grades 6-12 not reading at benchmark on a nationally normed reading comprehension assessment were screened using an Oral Reading Fluency assessment.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Was the screener reliable?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>*NWF see Appendix A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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24 See page 32.
25 https://drive.google.com/file/d/1EZGjIMW1g95cSd9JYOx3KHyV/view
Some general considerations when the trend line is showing good progress might be:

- How close is this student’s progress to the next benchmark goal?
- Should the intervention continue or should the student be moved to a group targeting similar needs?
- Could this successful intervention be duplicated with other students showing similar progress?
- How will we ensure the growth made is sustained?

Some general considerations when the trend line is showing some, but not enough, progress might be:

- What has been the attendance? Have there been interruptions in this intervention? (teacher absence, intervention cancelled for other activities, etc.)
- Has the intervention curriculum been used or are we monitoring the correct skill? (Students with word-level reading difficulties are often inaccurate readers - progress monitoring should focus on increasing accuracy before increasing rate).
- Is the pace of instruction too slow? How many opportunities to respond is this student getting?
- How does this student’s performance compare to other members of the same intervention group?

Even with adjustments or customizations, there may still be students who are not responding to the interventions provided. If regular progress monitoring reflects a persistent difficulty with fluency, word recognition, accurate decoding, and/or reading comprehension, it may be appropriate to evaluate for dyslexia. Educators should be aware that a student may have reached middle school without ever being screened, evaluated or identified.
All accredited schools in Kansas should continue to monitor students for common risk factors of dyslexia. Screening three times per year provides that first level of progress monitoring. However, students who are receiving Tier 2 or Tier 3 supports need to receive more frequent progress monitoring. Evidence and research strongly suggest districts use the same assessment system to progress monitor as they use for screening.

Ongoing progress monitoring allows educators to assess student academic performance in order to evaluate student response to evidence-based instruction. Progress can be monitored weekly, but no less than one time per month. Progress monitoring probes can be general outcome measures, such as those used for universal screening, or skills-based measures that focus on a specific set of skills that will be taught in the intervention setting.

KSDE recommends progress monitoring measures for grades kindergarten through 12th grade as referenced in the table below:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Possible Progress Monitoring Measures</th>
</tr>
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| Kindergarten     | • Phoneme Segmentation  
                   | • Letter Sound Fluency                                                   |
| Grade 1          | • Letter Sound Fluency (real-word reading)                               |
| Grades 2 - 12    | • Oral Reading Fluency (connected text)                                 |

Once sufficient data has been gathered, grade level teams should be able to evaluate whether the student is not only making progress, but whether they are making enough progress to close the gap in achievement with peers. Those progress monitoring data points should be evaluated on a graph. Most assessment systems provide that graph as progress monitoring data is entered and will begin to generate a projection or trend line. Generally, trend lines fall into three categories: inconsistent data, making progress or not making progress.

If the data is wildly inconsistent, the team may want to consider the validity of the data, as well as giving the intervention a little more time so a trend line can be established.

Students who are making good progress with an intervention are a cause for celebration! Closing the gap for a student's reading is a change in that child's trajectory.

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Learning to read and write is not a natural process and requires mastery of fundamental language skills. For the majority of students, explicit instruction in reading, spelling, writing, and language must be taught on a continuum for reading to take place. Many students with dyslexia or characteristics of dyslexia can be taught in the general education classroom with skilled teaching. Successful classroom instruction delivered by an informed educator, especially in the early grades, can prevent or at least effectively address and limit the severity of reading and writing problems. Possible reading problems can be identified as early as preschool and kindergarten. Therefore, research evidence shows that with appropriate, intensive instruction, all but the most severe reading disabilities can be improved in the early grades and get students on the road to academic achievement.

A series of studies have substantiated that good teaching matters when it comes to effective reading instruction. Expertise in reading instruction, which is explicit, systematic, multisensory and executed in a gradual release format, is the most efficient way for students to learn. The skilled teacher should deliver instruction to dyslexic students in a manner until skill automaticity is reached.

The International Dyslexia Association (IDA) defines what all teachers of reading need to know and be able to do to teach all students to read proficiently. In the IDA Knowledge and Practice Standards for Teachers of Reading outlines standards for classroom teachers. Please refer to this resource for more detailed information regarding the complex skills surrounding being a skilled, effective teacher of reading.

There is evidence that blending skills develop sooner than analysis skills, and that students can have good blending skills and inadequate reading development. Only when both blending and analysis skills are mastered do we see benefits for reading development.

- David Kilpatrick, Essentials of Assessing, Preventing, and Overcoming Reading Difficulties, 2015

- Allington & Johnston, 2002
- Darling-Hammond, 1996
- Pressley, et al, 2001
- Taylor, Pearson, Clark & Wapolke, 2000
Teaching a student to read requires more than knowledge of what to teach. According to Holly Lane of the University of Florida, “Effective teachers understand how to identify their students’ instructional needs, select appropriate materials, organize instruction to maximize learning, and differentiate instruction to meet individual needs.” (2014, p. 25)

As teachers and reading specialists design literacy instruction to meet the needs of students with dyslexia or characteristics of dyslexia, it will be important for key implications documented by researchers to be recognized and woven into the district or school level intervention plans. Structured literacy interventions can assist teachers in using evidence when evaluating programs and teacher training for implementation.

The National Reading Panel (2000) emphasized that phonemic awareness and phonics (decoding) should be included in all reading instruction that focuses on language comprehension such as vocabulary, fluency, and reading and/or listening comprehension so that a complete reading program is created.

Gough and Tunmer, 1986, and Hoover and Gough, 1990, described reading as the product of word recognition (decoding) and language comprehension. They add that these components work together in an interdependent balance and that when there is a disconnection between these components, reading failure can occur. This model is referred to as the Simple View of Reading:

Decoding X Language Comprehension = Reading Comprehension

Hollis Scarborough, a leading researcher in literacy, expands the Simple View of Reading and communicates that reading is a multifaceted skill that is gradually acquired through years of instruction and practice (see image below). Scarborough’s Reading Rope, illustrates how the many skills that are required to comprehend texts are intertwined and become more complex. The strands weave together over many years and enable a student to become a skilled reader.

THE MANY STRANDS THAT ARE WOVEN INTO SKILLED READING

While teaching in an intervention setting, the instruction provided to the struggling reader should have the following evidence-based practices for effectiveness:

- Fidelity to instructional protocols of programming.
- Explicit and direct instruction.
- Scaffolded instruction which includes a gradual release of responsibility (I do, we do, you do).
- Frequent opportunities to respond.
- Sufficient questioning and check for understanding.
- Frequent opportunities for skill practice.

Intervention instruction should match the individual student’s reading deficits and additional informal diagnostic tools may sometimes be used to determine where, within the reading continuum the student continues to struggle. These groups receive a carefully selected evidence-based curriculum designed to address the specific skill deficits and progress is monitored to determine if and how the student is responding to the intervention.

Reading intervention at the secondary level begins with common instructional strategies across content areas below benchmark comprehension skills, the problem probe to determine if the student’s issues are at the word reading level (inaccuracy and/or dysfluency) or if the issue exists primarily in the areas of vocabulary and comprehension. Secondary students who are struggling readers or at risk for dyslexia require instruction with a focus on parallel tracks: they need instruction to close the gap with their reading deficits and scaffolding and differentiation for access to their core content classes.
The Structured Literacy Framework

Structured Literacy Instruction Principles

All students can benefit from evidence-based core reading instruction. When all students receive evidence-based reading instruction, success in reading is more likely. This type of instruction, also called multisensory structured literacy, when provided with sufficient corrective feedback, will result in the highest level of reading achievement.

DYSLEXIA HANDBOOK

Syntax
Syntax is the set of rules that govern the sequence and function of words in a sentence in order to convey meaning. Syntax is the proper order of words in a sentence or phrase and is a tool used in writing proper grammatical sentences. Some examples of syntax, or grammar, could be: parts of speech, rules for correct word order, sentence length, sentence types, and sentence constructions.

Vocabulary
Vocabulary is the knowledge of words and their meanings in oral language and in print. Vocabulary can be receptive (understanding) and expressive (productive). Vocabulary knowledge plays a significant role in comprehension. Explicit vocabulary instruction is critical for struggling readers and students with dyslexia.

Orthography
Orthography refers to the written spelling patterns and rules in a language. For example, the sound /j/ immediately following a short vowel in a one-syllable word is spelled with -dge. Students must be taught the regular and irregular orthographic patterns of a language in an explicit and systematic manner. Orthography instruction should be integrated with phonology, sound-symbol knowledge, and morphology.

Morphology
Morphology is the set of rules that govern how morphemes (base words, prefixes, roots, and suffixes) can be combined to form words. A morpheme is the smallest unit of meaning in a language. Learning frequently used morphemes in a systematic manner to automaticity not only helps spelling but also provides students with strategies for decoding.

Orthography

<table>
<thead>
<tr>
<th>SYLLABLE TYPE</th>
<th>EXAMPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Closed (CVC)</td>
<td>bat, trip, crash, bend</td>
</tr>
<tr>
<td>Vowel-consonant-e (VCe)</td>
<td>ripe, gate, stripe, mope</td>
</tr>
<tr>
<td>Open (VC)</td>
<td>hi, be, no, she</td>
</tr>
<tr>
<td>Consonant-le</td>
<td>table, circle, beetle, eagle</td>
</tr>
<tr>
<td>Vowel-r</td>
<td>yard, germ, dirt, turn</td>
</tr>
<tr>
<td>Vowel digraphs/ diphthongs</td>
<td>trout, noise, joy, oil</td>
</tr>
</tbody>
</table>

Syllable instruction
Syllable instruction is breaking down words into parts (syllables) with one vowel sound or pattern. There are six syllable types in the English language as listed below:

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“Even the most obscure and complicated appearing words can be broken down into more manageable units and deciphered if the reader is aware of their derivation or roots.”

-Shaywitz, 2006

Fluency also has the component of prosody, which is the pitch, tone, volume, emphasis and rhythm in speech and oral reading.

For students who have not benefited from evidenced based core reading instruction, providing intervention by a skilled teacher using direct, systematic and sequential instruction, focused on the structure of language will enable students who struggle to read, students with dyslexia and students with characteristics of dyslexia to make significant progress in reading.

Some popularly used reading approaches, such as guided reading or balanced literacy, are not in and of themselves, sufficient for students with dyslexia, characteristics of dyslexia, or struggling readers. These approaches do not provide sufficient or appropriate instruction in decoding and the essentials of the structure of the English language. For students who have not benefited from evidence-based core reading instruction, providing intervention by a skilled teacher using direct, systematic and sequential instruction, focused on the structure of language will enable students who struggle to read, students with dyslexia and students with characteristics of dyslexia to make significant progress in reading.

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Structured Literacy Instruction Elements

Phonological Awareness

Phonological Awareness is the understanding of internal linguistic structure of words (onset and rime, syllables, phonemes). An important aspect of phonological awareness is the ability to segment words into their component phonemes. A phoneme is the smallest unit of sound in a given language that can be discriminated as being distinct from other sounds. For example, in the word ship, the sounds /sh/ /i/ /p/ are the three phonemes that make up the written word, ship. The importance of recognizing phonological awareness as a foundation for decoding cannot be overemphasized. Students who exhibit phonemic awareness have developed the alphabetic principle.

“Teaching is done using all learning pathways in the brain (visual, auditory, kinesthetic, tactile) simultaneously in order to enhance memory and learning.” When learning to read, a student will use many senses: visual feedback to learn letter shapes and sounds on a page, auditory feedback to learn sounds of language (phonemes), kinesthetic movement and tactile feedback to anchor learning in working memory, and speaking, to feel the movements in the mouth as sounds are said, to learn the sounds of our language. Teaching using a multisensory approach means to engage more than one sense at a time. Every lesson taught using this approach will use all of a child’s senses. Most multisensory lessons engage students in material in more than one way.

Multisensory Instruction

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Automaticity

Skilled teachers will instruct students until a new skill becomes automatic. Automaticity refers to the ability to produce reading skills without occupying working memory as a result of repetition and practice. When a skill becomes automatic (direct access without conscious awareness), it is performed quickly in an efficient manner. In order for teachers to determine if automaticity has been reached, diagnostic testing and continual monitoring of skill mastery is required.

Explicit Instruction

The skilled, effective reading teacher will deliver instruction in an explicit manner. Teaching using explicit instruction required that new skills be clearly modeled or demonstrated. New concepts should be presented with examples and non-examples such that students are not inferring what is to be learned. The process of modeling the new skill is repeated until such time that the students can apply the skill independently. As the student is demonstrating mastery of the new skill, the teacher provides corrective feedback.

Systematic and Cumulative Instruction

Systematic and cumulative instruction requires that the sequence of instruction begin with the simplest concepts (concepts that the student does not know) and progress to more difficult concepts. An example of a sequence for instruction is shown in the Sample Scope and Sequence Chart in Appendix D of this handbook.

Sound-Symbol Association

Sound-Symbol Association is the ability to associate letter or letter combinations with their sounds. In reading, students must read/say the correct sound when they see the letter in which it is associated. Additionally, students must be able to blend sounds into words for reading. In spelling, students must spell/write the correct letter for which they hear the sound. Next, students must segment the sounds in words and write the associated letter(s) in order to spell words. There are 44 sounds (phonemes) in the English language represented by letters or combinations of letters (graphemes) of the 26 letters of the English alphabet. The table below gives a few examples of sound-symbol associations for consonants in English.

<table>
<thead>
<tr>
<th>Phoneme (sound)</th>
<th>/b/</th>
<th>/g/</th>
<th>/m/</th>
<th>/l/</th>
<th>/kh/</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grapheme (letter representation)</td>
<td>b, bb</td>
<td>g, gg</td>
<td>m, mm</td>
<td>c, k, l, q</td>
<td>ch, t</td>
</tr>
</tbody>
</table>