Anchorage School
Dyslexia Toolkit for Families
Updated Spring 2022

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Purpose of the
Anchorage Dyslexia Toolkit

The purpose of the Anchorage Dyslexia Toolkit is to provide our school staff with guidance to meet requirements of The Ready to Read Act (House Bill 187, 2018) and to provide our staff and families with useful resources to best meet the needs of students with dyslexia or those who display characteristics of dyslexia. The Kentucky Department of Education released a K-3 Dyslexia Toolkit in January 2019.

https://education.ky.gov/curriculum/standards/teachtools/Documents/Dyslexia_Toolkit_2019.pdf

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Introduction

Dyslexia refers to a learning disability that affects reading and writing. What dyslexia is, what causes it, and what can be done about it are commonly misunderstood topics. For example, a commonly held belief is that dyslexia results in seeing things reversed. Dyslexia is not due to a problem with vision, but rather a problem within language.

Although much remains to be learned about dyslexia, remarkable progress has been made in our understanding as the result of decades of research. A goal of this toolkit is to provide information about dyslexia that is intended to be helpful to families.

What is Dyslexia?

Dyslexia as defined in KRS 158.307, “means a specific learning disability that is neurological in origin. It is characterized by difficulties with accurate or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological components 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.”

It is useful to consider each of the elements of this definition:

***Dyslexia is a specific learning disability that is neurological in origin*.** Dyslexia is a term used to refer to a specific type of learning disability. It is important to understand that students can be diagnosed with a specific learning disability as defined in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V), but not automatically qualify as having a disability as defined in Individuals with Disabilities Education Act (IDEA, 2004), and the Kentucky special education rules and regulations, which govern the provision of special education services to students with disabilities. These regulations specify that each school district is responsible for ensuring that all children with disabilities within its jurisdiction who are in need of special education and related services are identified, located, and evaluated. The regulations make clear that having a disability, in and of itself, does not make a child eligible for special education services. The child must also have a need for special education and related services arising from that disability. The impact of the disability on the child must be significant enough that it adversely affects the student’s access to general education curriculum, and the child’s ability to make meaningful educational progress.

The statement that dyslexia is neurological in origin implies that the problem is not simply one of poor instruction or effort on the part of the student. Individuals with dyslexia struggle to read well despite adequate instruction and effort. Dyslexia occurs in individuals of all backgrounds and intellectual levels and can be hereditary. A child from

a biological family with a history of dyslexia will not necessarily have dyslexia but inherits a greater risk for reading problems than does a child from a biological family without a family history of dyslexia. Brain imaging studies show differences in brain activity when individuals with dyslexia are given reading-related tasks compared to the brain activity shown by normal readers. Although it is tempting to view differences in brain activity as the cause of dyslexia, these differences are just as likely or even more likely to be a consequence of the reading problem rather than the cause of it. The reason for saying this is that when individuals with dyslexia respond positively to intervention, their brain activity "normalizes" and becomes comparable to that of normal readers.

Dyslexia is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. Common features of dyslexia include difficulty with accurate and/or fluent word recognition and by poor spelling and decoding abilities. Although students with dyslexia can show a variety of subtle or not-so-subtle language problems prior to entry in school (Catts & Kahmi, 2005), their problems become very noticeable once they begin learning to read. They have extreme difficulties acquiring accurate and fluent phonemic decoding skills (phonics), and this interferes with their ability to read text accurately or to read independently.

Students with dyslexia struggle to acquire both knowledge of letter-sound correspondences and skill in using this knowledge to "decode" unfamiliar words in text. In first grade, their difficulties with accurate word identification quickly begin to interfere with the development of text reading fluency. Difficulties decoding unfamiliar words in text interfere with the development of fluency because, to become a fluent reader in the primary grades, students must learn to recognize large numbers of words automatically, or at a single glance. Students learn to recognize individual words "by sight" only after they accurately read them several times (Ehri, 2002). Thus, the initial difficulties that students with dyslexia have in becoming accurate and independent readers interfere with the development of their "sight word vocabularies," and they quickly fall behind their peers in the development of reading fluency.

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. The discovery that students with dyslexia experience difficulties processing the phonological features of language was important in establishing the foundations of the current scientific understanding of dyslexia (Liberman, Shankweiler, & Liberman, 1989). The phonological processing problems of students with dyslexia are usually not severe enough to interfere with the acquisition of speech, but they sometimes produce delays in language development, and they significantly interfere with the development of phonemic awareness and phonics skills for reading. Spoken words are composed of strings of phonemes, with a phoneme being the smallest unit of sound in a word that makes a difference to its meaning. Thus, the word *cat* has three phonemes, /c/-/a/-/t/. If the first phoneme is changed to /b/, it makes the word *bat*, or if the second phoneme is changed to /i/, it makes the word *bit*. When students first begin to learn to read, they must become aware of these individual bits of sound within syllables, so they can learn how our writing system represents words in print. The letters in printed words correspond roughly to the phonemes in spoken words. Once a child understands this fact, and begins to learn some of the more common letter/sound correspondences, he/she becomes able to "sound out" simple unfamiliar words in print. Skill in using phonemic analysis to identify words that have not been seen before in print (and beginning readers encounter these words in their reading almost every day) is one of the foundational skills required in learning to read text independently (Share & Stanovich, 1995). Because of their phonological processing difficulties, students with dyslexia experience difficulties acquiring phonemic awareness, which is followed by the difficulties learning letter sounds and phonemic decoding skills that have already been described. Phonological processing skills are only moderately correlated with general intelligence, so it is possible to have average, or above average general intellectual ability and still experience the kind of reading difficulties observed in students with dyslexia. A student can also have below average general intellectual skills and have the same kind of phonological processing disabilities. Dyslexia is *not caused* by low general intellectual ability, but rather by special difficulties processing the phonological

features of language that can coexist with above average, average, or below average general intellectual ability. Phonological processing abilities required for acquisition of early reading skills are normally distributed in the population, just like musical talent, athletic ability, or most other human abilities. It is possible to have extremely weak phonological processing skills or to be only mildly impaired in this area. It is also possible to have above average skills in the phonological domain.

If students have extreme phonological processing weaknesses, it is very difficult for them to acquire early reading skills, while students with mild difficulties in this area often require only a moderate amount of extra instruction to become good readers (Wagner & Torgesen, 1987).

Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede growth of vocabulary and background knowledge. One of the most serious consequences of early difficulties becoming an accurate, confident, fluent, and independent reader is that students read less. For example, a study from 1988 indicated that students reading at the 50th percentile (average) in 5th grade read about 600,000 words in and out of school during the school year. In contrast, students reading at the 10th percentile read about 50,000 words during the same period of time (Anderson, Wilson, & Fielding, 1988). Large differences in reading practice emerge as early as the beginning of first grade (Allington, 1984). In addition to directly affecting the development of reading fluency, these practice differences have a significant impact on the development of other cognitive skills and knowledge, such as vocabulary, reading comprehension strategies, and conceptual knowledge (Cunningham & Stanovich, 1998). This latter type of knowledge and skill, in turn, is important for comprehension of texts in upper elementary, middle, and high school (Rand, 2002). Of course, other “secondary consequences” to the child’s self-esteem and interest in school can be just as important as the effect on intellectual skills in determining ultimate school success.

Early Indicators and Characteristics of Dyslexia

Characteristics of students with dyslexia follow from how it is defined. Students with dyslexia are likely to perform poorly on measures of phonological processing, decoding nonwords, and developing an adequate pool of sight words.

Beginning with phonological processing, measures of phonological awareness tend to be most predictive of success at early reading. Common phonological awareness tasks include elision (saying a word after dropping a sound), blending, and identifying sounds in words. Phonological memory can also be affected, and phonological memory tasks can be particularly useful for young children who sometimes find phonological awareness tasks too cognitively complex to understand. Common phonological memory tasks include digit span and nonword repetition. Finally, learning to read involves pairing pronunciations with visual symbols. Rapid naming tasks measure the extent to which children have been able to link pronunciations with symbols. Examples of rapid naming tasks include quickly naming objects, colors, digits, or letters.

Turning to reading, difficulty in learning the names and sounds of letters is an early indicator of dyslexia. Perhaps the most central characteristics of dyslexia are problems in word-level reading. Difficulties are found in both accuracy and speed or efficiency at decoding nonwords and sight words. Difficulty with reading words results in slow and error-prone oral reading fluency. Spelling and writing problems are common. Reading comprehension difficulties are also common, but are considered to be largely a secondary problem caused by the primary problem of difficulty in fluently reading the words on the page.

Children likely to have difficulties learning to read can be identified as early as preschool or kindergarten, but it is frequently not possible to differentiate in preschool or kindergarten between students who have dyslexia and students who are at risk for reading problems for other reasons. For example, the clearest early indicators of dyslexia in kindergarten are difficulties acquiring phonemic awareness, learning letter/sound correspondences, and learning to decode print using phonemic decoding strategies (Rayner, Foorman, Perfetti, Pesetsky, & Seidenberg, 2001). Unfortunately, many children of poverty, or those with limited exposure to Standard English in their

homes, also manifest these same types of difficulties in kindergarten. An accurate diagnosis of dyslexia in preschool or kindergarten is more likely when these problems occur in students who: 1) have strong abilities in other areas of language such as vocabulary; 2) come from homes that provide a language and print rich preschool environment; and, 3) have a first or second-degree relative who experienced severe early reading difficulties. However, inherent phonological processing difficulties can also occur in children of poverty who come to school with limited vocabularies and knowledge of print. Although the phonological weaknesses of these students most likely result from a lack of certain kinds of language experience in the home, they may also be the result of biologically based, inherent phonological processing weaknesses.

Classroom Strategies

To support the success of students with dyslexia, teachers can implement strategies to accommodate their academic needs and address the challenges students face across all learning environments. The following examples offer strategies for providing support involving materials, instruction and student performance. For a comprehensive list of these strategies, see International Dyslexia Association's guidance for the classroom at dyslexiaida.org.

- Clarify or simplify written directions.
- Present the work in small amounts.
- Highlight essential information.
- Block out extraneous stimuli on a page.
- Use explicit teaching procedures.
- Repeat directions.
- Use balanced presentations and activities.
- Use graphic organizers.
- Change response mode for assessment of learning.
- Encourage students to use multisensory techniques, such as subvocalization.
- Allow students to use an instrument (pencil, index card, window card) to alleviate tracking issues.

Dyslexia Intervention and Multi Tiered Systems of Support (MTSS)

Students who consistently struggle with grade-level reading skills are required to be provided with targeted, tiered intervention support. Kentucky's System of Interventions (KSI) framework provides a systematic, comprehensive multi-tiered system of supports to address academic and behavioral needs for all students, Preschool through grade 12. The KSI framework emphasized optimizing instruction through targeted accelerated learning and the development of teacher expertise and responsiveness to the needs of all learners. What is effective for every learner, including those students identified with or displaying characteristics of dyslexia, is a systematic ongoing assessment of their academic and behavior needs using the data in collaborative conversations with parents and educators.

Tiered interventions are provided to assist students who are struggling with academic or behavior goals and are not performing at grade level standards with their peers. Intervention programming provides the structures needed for closing achievement gaps, aiming to help the student experience growth and achievement. Instruction through the three tiers should be a flexible and fluid process based on student assessment data to provide continuous progress so students are successful. The KDE's "KSI RtI Guidance Document" describes the three tiers as follows:

TIER 1: UNIVERSAL/CORE INSTRUCTION

Tier I is the highly effective, culturally responsive, evidence-based core or universal instruction, provided to all students, including those with or displaying characteristics of dyslexia, in the general education classroom. General education teachers implement evidence-based curriculum and/or strategies with fidelity for both academic and behavioral instruction. About 80 percent of students will succeed with evidence-based curriculum, appropriate instructional practices and differentiation to teach academic and behavioral content.

TIER 2: TARGETED INSTRUCTION

Tier 2 provides Tier 1 core/universal instruction in addition to academic and behavioral interventions for any students, including those with or displaying characteristics of dyslexia, not making adequate progress or who have exceeded the standards. Students in Tier 2 receive increasingly targeted academic or behavioral instruction matched to their needs based on results of continuous progress monitoring. Instruction in Tier 2 can involve small groups of students or individualized intervention strategies focused on the targeted area/s.

For students with learning/behavioral difficulties or other instructional needs, Tier 2 is intended to address needs and provide support to be successful in Tier 1. For students with high abilities and others exceeding advanced expectations, Tier 2 is designed to provide further challenges that are differentiated for pace, content and complexity.

TIER 3: INTENSIVE INSTRUCTION

Tier 3 provides Tier 1 core instruction in addition to interventions for students, including those with or displaying characteristics of dyslexia, not making adequate progress in the curriculum and Tier 2. Tier 3 interventions are more intensive to the student's individual academic or behavioral needs and the student's progress is monitored more frequently. For students with learning/behavioral difficulties or other instructional needs, Tier 3 is intended to provide more intense, individualized instruction based on student needs and address concerns that have continued even with the support of instruction in Tiers 1 and 2. For students with high abilities and others exceeding advanced expectations, Tier 3 is designed to provide intensive instruction and/or highly individualized challenges.

Anchorage School MTSS Process

All students K-8 are universally screened using MAP Growth Measure of Academic Progress to see how students are performing in the area of reading. Students in grades K-1 are also assessed using MAP Reading Fluency. For Students new to APS in K-3 grade or any older student showing concerns in the area of basic reading, the dyslexia screener will be given.

Results of the universal screener, dyslexia screener and progress monitoring data is reviewed regularly by the Student Teacher Assistance Team (STAT). The classroom teacher works with the point person to gather the data and documentation needed for the STAT team to review to make recommendations.

If the dyslexia screening indicates that a student has characteristics of dyslexia, the STAT team will start the Multi-Tiered System of Support (MTSS) process listed above (Kentucky System of Interventions.) Dyslexia intervention services fall under the RTI framework, within MTSS. If dyslexia screening indicates characteristics of dyslexia exist, then the student shall be provided intervention services in the area of need.

MTSS is designed to ensure all students receive effective, evidence-based instruction to meet their learning needs. The MTSS process combines prevention and intervention with ongoing assessment in a school-wide system to identify a student's instructional needs and appropriate learning supports. Students exhibiting the characteristics of dyslexia are to receive dyslexia intervention. For a student with an IEP, dyslexia intervention may be delivered in the general education setting, the special education setting, or in a combination of the two. Regardless of the setting, Anchorage strives to provide dyslexia interventions utilizing highly qualified staff delivering the program with fidelity.

A student exhibiting the characteristics of dyslexia may receive dyslexia intervention services whether or not they are tiered within MTSS. Dyslexia intervention is small group instruction delivered by trained staff using the school's selected dyslexia intervention program or programs. Progress monitoring is a part of MTSS and should be frequent and ongoing. The data should be used to monitor a student's progress on

both the content covered during the intervention lessons and the student's progress toward meeting grade level standards. The data will drive decisions regarding details such as frequency, length, duration, and intensity of sessions. Information specific to RTI can be found on the Kentucky Department of Education Website. https://education.ky.gov/educational/int/ksi/Documents/KSIRtIGuidanceDocument.pdf

Universal Screening for Dyslexia

Early identification of students at risk for reading difficulties is critical in developing the appropriate instructional plan. Initial screening is the first step of identifying the students who are at risk for learning difficulties. Initial screening measures consist of short, informal probe(s) given to all students to identify those at risk or at some risk for not meeting grade-level standards.

1. Phonological and phonemic awareness;
2. Sound symbol recognition;
3. Alphabet knowledge;
4. Decoding skills;
5. Rapid naming; and
6. Encoding skills.
7. Vocabulary
8. Language Comprehension

Students who will be screened

1. Each student in kindergarten through grade three (K-3);
   - All kindergarten students will be screened three times per year (fall, winter, & spring)
   - In grades 1-3 students identified in Basic Reading receiving Tier II or Tier III services are screened three times per year (fall, winter, & spring).
2. Kindergarten through grade 3 (K-3) students who transfer from another school and have not been screened;
3. Kindergarten through grade 3 (K-3) students who transfer from another state and without documentation that the student has had similar screening;
4. A student in grade three or higher experiencing difficulty, as noted by a classroom teacher.

The screening components may not be appropriate for students with severe cognitive limitations. It is recommended that school staff work closely with school administrators to determine if the screening is appropriate for each student. Careful consideration must be given to any decision to exclude a student from screening.

Personnel administering the screener should be trained in the screening tools. Because the data will be used to help guide instruction, classroom teachers should participate in screening, and progress monitoring.

The performance criteria should be used to determine if the student is unlikely to achieve reading goals without receiving additional targeted intensive support. Based on the results, the teachers and interventionists will collaborate to determine the best interventions for the student.

The Anchorage School Universal Dyslexia Screener is the NWEA MAP Dyslexia Screener.

The MAP Dyslexia Screener measures the components below..

1. Phonological and phonemic awareness;
2. Sound symbol recognition;
3. Alphabet knowledge;
4. Decoding skills;
5. Rapid naming; and
6. Encoding skills.
7. Vocabulary
8. Language Comprehension

Level I Dyslexia Screening

If the (universal) screener shows that a student has potential for showing characteristics of dyslexia, then interventions/differentiated instruction will be put in place to support the students in the deficit areas. After interventions/differentiation have been put in place, if the student in grades K-3 continues to show difficulty in any of the six areas after 12 weeks of instruction, the Level 1 Screener will be administered. For students in grades 4-8 that experience difficulties in any of the six areas will be administered the Level 1 Screener and be referred to the STAT team to review data. The level I dyslexia screening at APS uses the AIMSweb Plus Early Literacy Profile.

The level I dyslexia screening is a process of gathering additional information that should include progress monitoring data, work samples, formative literacy assessments, early indicator checklists and additional age and grade appropriate dyslexia screening tools for the six areas. The determination of existing characteristics of dyslexia should be based on multiple sources of data. The STAT team will meet to review student records and progress.

Level II Dyslexia Screening

If the Level I screener indicates a student demonstrates characteristics of dyslexia interventions will be put in place to support the students in the deficit areas. After interventions have been put in place, if the student in grades K-3 continues to show struggles in any of the six areas after 12 weeks of instruction the teacher will refer the student to the STAT team. The STAT team will review the data to determine if the student needs to move to the Level II screener. Students in grades 4-8 who are experiencing difficulties in any of the six areas will be referred to the STAT team to determine if the Level II screening is needed. The Level II Dyslexia Screening at APS uses the Comprehensive Test of Phonological Processing 2nd Edition (CTOPP-2).

The level II dyslexia screening is a process of gathering additional information that should include progress monitoring data, work samples, formative literacy assessments, early indicator checklists and additional age and grade appropriate dyslexia screening tools for the six areas. The determination of existing characteristics of dyslexia should be based on multiple sources of data. The STAT team will meet to review student records and progress.

Interventions

A dyslexia diagnosis is not required for a school to provide dyslexia intervention services, however a parent or legal guardian may choose to have an independent comprehensive dyslexia evaluation for the student. Parents are responsible for selecting the qualified individual to perform the comprehensive dyslexia evaluation and must cover the cost. The school district shall consider the diagnosis and provide the student with interventions determined to be appropriate. Schools should consider all sources of information when determining appropriate services for students.

These intensive interventions differ from core instruction in that they are targeted towards the specific skills and components of instruction that are preventing students from making sufficient reading progress. In addition, instructional delivery provides higher levels of support needed to help students accelerate their reading growth; however, no one remedial reading method works for all dyslexic students.

Special Education and Dyslexia

A student suspected of having dyslexia or related disorders who is unable to make adequate academic progress may be referred to special education for evaluation and possible identification as a child with a disability within the meaning of IDEA 2004. IDEA 2004 regulations related to specific learning disability (SLD) (34 C.F.R. §300.8(c)(10)(i)) define SLD as a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. IDEA 2004 regulations (34 §CFR 300.309(a)(1)) specifically designate the following areas for the determination of SLD: oral expression, listening comprehension, written expression, basic reading skill, reading fluency skill, reading comprehension, mathematics calculation, and/or mathematics problem solving.

New Referrals

Although dyslexia is not considered one of the 13 eligible disability categories listed in the IDEA 2004 regulations (34 C.F.R. §300.8(c)), a student suspected of having dyslexia or related disorders who is unable to make adequate academic progress may be referred to special education for evaluation and possible identification as a child with a specific learning disability. It should be noted that the referral committee would make the decision as to whether or not an evaluation for special education was warranted and what assessments were needed based on the child's suspected disability. If the referral committee decided against an evaluation for special education, the school district would screen the student for dyslexia if such screening had not already been conducted.

Students with existing IEP's

A student who qualifies for special education services is not exempt from dyslexia screening or dyslexia intervention services. Rather than starting with initial dyslexia screening, the committee should review existing formal and informal evaluation data to determine if the student exhibits the characteristics of dyslexia. The committee may determine that additional assessments are needed.

Students who qualify for special education have an individual education program (IEP) developed by the IEP committee. The IEP should be developed to address the student's individual needs, including any needs relative to dyslexia. If a student with a disability exhibits the characteristics of dyslexia, the IEP committee would determine whether the student needs special education services in this area, if the student's needs can be met through the district's general education dyslexia intervention program, or if a combination of the two are needed.

Training

- All staff administering the screenings will be trained to administer the screener.
- Professional development will be provided by OVEC in Structured Literacy.
- With APS adoption of ELA HQIR, training will be provided to staff.
- LETRS training will be provided to K-5 regular education teachers, ECE teachers, interventionists, and instructional assistants along with administrators as part of the Kentucky Reading Academies through KDE.

Parent Communication

- All parents will receive communication about their child's results after the universal screener is administered and prior to fall parent teacher conferences.
- Parents will additionally receive communication if their child is administered the Level I or Level II screener.
- Parents of students receiving Tier II or Tier III interventions will receive 6 week updates on their child's progress.

Characteristics of Dyslexia

Underlying Cause:

- Deficit in the phonological processing (Phonological awareness, phonological memory, and\or rapid naming)

Characteristics:

- Difficulty reading real words in isolation
- Difficulty accurately decoding nonsense or unfamiliar words
- Poor reading fluency (rate, accuracy, labored)
- Poor spelling

Outcomes:

- Difficulty with reading comprehension
- Reduced reading experience that limits vocabulary and background knowledge

Early Indicators Checklist

Family History:

- ❑ Other family members experienced learning problems Father, Mother, Sibling(s)

Oral Language:

- ❑ Difficulty understanding verbal directions
- ❑ Difficulty understanding stories read to him/her
- ❑ Difficulty correctly pronouncing phonemes or syllables of words in sequence; persistent baby talk (busgetti for spaghetti, mawn lower for lawn mower, fibe for five)
- ❑ Substitutes words with the same meaning for words in the text he/she can't pronounce, such as "car" for "automobile."
- ❑ Difficulty acquiring new vocabulary
- ❑ Difficulty finding the right words
- ❑ Unable to find the exact word;

  Speech that is not fluent;

  Pauses, hesitations when speaking;

  Lots of "um"s
- ❑ Imprecise language, such as vague references to "stuff" or "things" instead of the proper name of an object
- ❑ Unable to find the exact word; confusing words that sound alike: saying "tornado" instead of "volcano," substituting "lotion" for "ocean," or "humanity" for "humidity"
- ❑ Difficulty speaking in grammatically correct sentences
- ❑ Difficulty explaining ideas or elaborating on thoughts

Phonological Awareness:

- ❑ Difficulty recognizing or producing rhyming words
- ❑ Difficulty isolating sounds in the beginning, final, and/ or medial position ❑ Difficulty segmenting individual sounds in a word
- ❑ Difficulty blending sounds into a word

Alphabet:

- ❑ Difficulty learning or recalling the names of letters
- ❑ Difficulty learning or recalling the sounds of letters

Decoding and Word Recognition:

- ❑ Difficulty sounding out unfamiliar or nonsense words
- ❑ Difficulty reading words in isolation (lists)
- ❑ May confuse small words - at - to, said - and, does - goes

Fluency:

- ❑ Difficulty with reading accuracy in context
- ❑ Difficulty reading grade level text at expected rate
- ❑ Difficulty with reading with expression

Spelling:

- ❑ Difficulty memorizing words for spelling tests
- ❑ Difficulty spelling words in context, even after spelling them correctly on a spelling test
- ❑ Difficulty spelling words phonetically

Comprehension:

- ❑ Difficulty with reading comprehension, but not when read to
- ❑ Better understanding of words in context than words isolated in lists

Written Expression:

- ❑ Difficulty constructing sentences
- ❑ Difficulty organizing grade appropriate written compositions
- ❑ Difficulty producing sufficient written output
- ❑ Written expression does not match verbal expression(Content, organization, vocabulary)

Handwriting:

- ❑ Slow with handwriting tasks
- ❑ Overall poor quality/illegible handwriting on written assignment
- ❑ Awkward, fist-like, or tight pencil grip

Cognitive/Academic Ability:

- ❑ The student appears to have intellectual ability equal to or above grade level peers.
- ❑ The student has grade level math calculation skills.
- ❑ The student appears to have grade level math reasoning skills
- ❑ The student has grade level listening comprehension skills.
- ❑ The student has reading difficulties that are unexpected compared to other abilities.
- ❑ The student requires many repetitions to learn something new.
- ❑ Compensates by memorizing stories or words but cannot keep up as demands increase
- ❑ Strength in thinking skills: conceptualization, reason, imagination,abstraction
- ❑ Strength in areas not dependent on reading, such as math, computers, and visual arts, or excellence in more conceptual

Social/Emotional/Behavioral:

- ❑ Shows frustration and anxiety, as he realizes he is lagging behind his peers
- ❑ Exhibits health or behavior problems, emotional difficulties or wants to avoid school
- ❑ Avoids reading aloud

Attention:

- ❑ Difficulty attending to tasks involving print.
- ❑ Difficulty organizing time and materials
- ❑ Is easily distracted
- ❑ Does many things too quickly
- ❑ Is often overactive or fidgety
- ❑ Is inconsistent with production of classwork and homework on written assignments

Student's Academic Development:

- ❑ English is a second language.
- ❑ The student was retained in grade.
- ❑ The student has been/is in special programs. (Special Education, Tiered

Interventions, etc.)

Suggested work samples to include:

- ❑ The student's most recent spelling test.
- ❑ A Sample of the student's unedited writing (journal entry, creative story, etc.)
- ❑ The student's most recent progress report or report card.
- ❑ A copy of most recent literacy screeners.

Adapted from Teacher Questionnaire for Dyslexia, Texas Scottish Rite

Glossary

Accommodation - a change that helps a student overcome or work around a disability. For example, allowing a student who has trouble writing to give his answers orally is an example of an accommodation. The student is still expected to know the same material and answer the same questions as fully as the other students, but he doesn't have to write his answers to show that he knows the information.

Alphabet knowledge - the ability to automatically recognize and name the 26 lowercase and 26 uppercase letters with ease and accuracy.

Characteristics - strengths and weaknesses in the various components of literacy associated with dyslexia. The characteristics are included in the definition of dyslexia as poor decoding, poor word recognition, poor fluency, and poor spelling.

Comprehension - understanding the intended meaning of language.

Core Instruction - the curriculum and instructional practices that are provided to all students in the general education setting.

Cut-point - a score on the scale of a screening tool or a progress monitoring tool. Educators use the cut point to determine whether the student has demonstrated adequate response, whether to administer additional assessments, whether to make an instructional change, and whether to move the student to more or less intensive services.

Decoding - to translate words, word parts, or nonwords into their corresponding pronunciation.

Diagnostic Assessment - assessments used to measure current skills and knowledge, often for the purpose of educational planning.

Differentiated Instruction - varying educational practices to meet the needs of different students.

Dyslexia - a specific learning disability characterized by difficulties with accurate and fluent word recognition, poor spelling and decoding abilities that typically result from the phonological component of language, and are often unexpected in relation to other cognitive abilities.

Elision - the ability to identify the remaining word when a specified sound is deleted.

Encoding - to translate spoken language into print.

Evaluation - procedures used to make judgments or appraisals.

Explicit, Direct Instruction - the overt teaching and modeling of the steps and processes needed to learn and apply new knowledge. Explicit, direct instruction targets the specific needs of the students without presuming prior skills or knowledge.

Fidelity - means the intervention is done as the author of the program intended.

Fluency - the ability to read the words in text effortlessly and efficiently (automaticity) with meaningful expression that enhances the meaning of the text (prosody).

Grapheme - a letter or letter cluster that represents an individual phoneme (i, i-e, igh, ch, tch...).

Graphophonemic Knowledge - refers to the letter - sound plan of English, including knowledge of the relationship between letters and sounds.

Indicator - a sign that shows or suggests the condition of something. Indicators of dyslexia are the early warning signs that indicate a child might have dyslexia. Indicators of dyslexia may differ at different ages.

Individualized Instruction - instruction that is designed to meet the specific needs of the student in a small group setting. Individualized instruction is intensive and highly concentrated instruction that focuses on the student's area(s) of primary difficulty and the instructional delivery necessary to assist students in accelerating their learning, maximizing student engagement in the process of learning.

Individuals with Disabilities Education Act (IDEA) - the law that outlines rights and regulations for students with disabilities in the U.S. who require special education.

Intervention - activities designed to improve or remediate performance in a given area.

Learning disabilities - a disorder in one or more of the basic psychological processes in understanding or using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations.

Linguistic Instruction - instruction aimed toward improving student proficiency and fluency with the patterns of language so that words and sentences are carriers of meaning.

Meaning-based Instruction - instruction that is focused on purposeful reading and writing tasks with an emphasis on comprehension and composition.

Morphological Awareness - awareness of the semantically meaningful units and structure of words.

Multisensory Instruction - instruction that incorporates the simultaneous use of two or more sensory pathways (visual, auditory, kinesthetic, and tactile) during teacher presentations and student practice.

Norm-referenced Test - an assessment that provides an estimate of the student's performance compared to other students in the population of the same age or grade.

Orthographic Knowledge - information in memory of how to represent spoken language in a written form.

Phonemic Awareness - enables a student to detect, segment, blend, and manipulate sounds in spoken language

Phonics - a systematic process for teaching sound-symbol relationships and their use in reading and spelling words.

Phonological Awareness - the ability to recognize and manipulate the sound system in spoken language; encompasses the entire continuum of skills related to the awareness of the phonological structure of language.

Phonological Processing - the ability to see or hear a word, break it down to discrete sounds, and then associate each sound with letter/s that make up the word**.**

Progress Monitoring - efficient, frequent, dynamic assessment of targeted skills to examine student growth and examine effectiveness of instruction.

Rapid Naming - or rapid automatized naming (RAN) is the ability to quickly name aloud a series of familiar items (colors, objects, letters, or numbers). Variations in rapid naming time in children provide a strong predictor of their later ability to read.

Research-based Instruction - instruction that is based on the findings of scientific research.

Response to Intervention - a multi-tiered decision-making process for providing effective instruction and intervention based on students' performance and progress.

Screening Assessment - an efficient assessment given to all students to identify students who are at risk for not meeting grade-level standards.

Sensory impairment - a vision or hearing impairment, or a combination of both, that cannot be corrected to a degree that the student can receive educational benefit from print and/or auditory information.

Small-group - A typical classroom reading group will include a maximum of 5-6 students. If a student exhibiting the characteristics of dyslexia hasn't been successful in the typical small reading group, he or she will likely need a smaller group for the dyslexia intervention. The group size for dyslexia intervention begins with the program guidelines, but should also take into consideration the severity of the reading deficiency and may need to be adjusted based on the individual student's progress monitoring data.

Sound Symbol Recognition - to automatically produce sound(s) or grapheme names (grade level letters or letter clusters) during recognition, production, and/or writing tasks.

Strategy-based Instruction - providing instruction in the step-by-step processes needed for students to independently complete complex tasks.

Structure of the English Language - English language structure consists of morphology (understanding the meaningful roots and affixes that make up words in the language), semantics (understanding how language carries meaning), syntax (understanding the conventions and rules for structuring meaningful sentences), and pragmatics (understanding how language conveys meaning in specific situations)

Systematic Instruction - sequential, cumulative instruction that follows a logical plan and progresses from easiest to most complex with careful pacing to ensure students successfully master each step in the process. Systematic instruction includes scaffolded support for accomplishing each learning step by breaking down complex skills into manageable learning steps and providing temporary support to control the level of difficulty as students gain mastery.

Vocabulary - words understood and used when listening, speaking, reading, and writing.

Word Recognition - the ability of a reader to recognize written words correctly and effortlessly.