

# **POTTSVILLE SCHOOL DISTRICT DYSLEXIA PROCESS 2021-2022**

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# **Dyslexia Committee**

## **Building Contact:**

Elementary/Middle Grades: Shawna Williams and other committee member/s

Junior High/High School: Beth Cox and other committee member/s:

## **Intervention Committee Members:**

- Classroom Teacher/s of Student
- Principal/s of Student: Elementary - Shannon Davis, Middle Grades - Houston Townsend, Junior High - Shane Thurman and Shanna Bly, High School - Jonathan Bradley
- Counselor/s of Student: Elementary - Jeff Duvall, Middle Grades – Taba Thurman, Junior High - Emily Roach, High School: Mark Lee
- Speech/Language Pathologists: Dana Aulgur, Jill Jones, Darla McNeely
- K-12 Curriculum Coordinator: Melissa Cox
- Dyslexia Specialists: Elementary/Middle Grades - Shawna Williams, Junior High/High School: Beth Cox
- Special Education teachers - Elementary: Hope Fry, Shelley Lambeth, Jennifer Moudy Middle Grades - Danielle Mears, Melanie Kinkade, Lisa Corbin, Junior High - Stephanie Guyse, Brenda Henderson, Krystle Vodran, High School - Allie Hare, Lisa Broyles, Christian Dacus
- Interventionists: Elementary - Leona Little, Mollie Kroger, Megan Davis, Tracy, Wages, Susan Ferguson, Tammy Sanders, Middle Grades - Tracy Ryals Junior High - Susan Coffman, High School: Tracy Simpson

## **Interventionist Responsibilities (Overview):**

- When contacted by a teacher regarding a student, the Interventionist will first collaborate with classroom teacher on instructional strategies to use in the classroom with the student.
- If the Committee members suspect that a student has word-level reading and spelling difficulties, he or she should be provisionally placed in Tier 2.
- Complete an initial screening of student (if necessary).
- Collect data on student.
- Arrange meetings with RTI members for a Dyslexia Evaluation (if necessary).
- Collaborate with Classroom Teacher/s on student progress.

## Defining Dyslexia

**Dyslexia is defined in Ark.Code Ann.6-41-602 as a learning disability that is neurological in origin, characterized by difficulties with accurate and fluent word recognition, poor spelling and low decoding abilities that typically result from the phonological component of language. These characteristics are often unexpected in relation to other cognitive abilities.**

**Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge.**

## Indicators of Dyslexia

### Indicators of Dyslexia:

- Word Awareness
- Rhyme
- Alliteration
- Symbols
- Onset and Rime

### Some Specific Examples:

#### Kindergarten through grade 4

Children in kindergarten through fourth grade may:

- Have difficulty reading single words that are not surrounded by other words.
- Be slow to learn the connection between letters and sounds.
- Confuse small words such as "at" and "to," or "does" and "goes."
- Make consistent reading and spelling errors, including:
- Letter reversals such as "d" for "b."
- Word reversals such as "tip" for "pit."
- Inversions such as "m" and "w" and "u" and "n."
- Transpositions such as "felt" and "left."
- Substitutions such as "house" and "home."

### **Grades 5 through 8**

Children in fifth through eighth grade may:

- Read at a lower level than expected.
- Reverse letter sequence such as "soiled" for "solid," "left" for "felt."
- Be slow to recognize and learn prefixes, suffixes, root words, and other reading and spelling strategies.
- Have difficulty spelling, and he or she may spell the same word differently on the same page.
- Avoid reading aloud. May turn into a behavior problem-class clown.
- Have trouble with word problems in math.
- Write with difficulty or have illegible handwriting. His or her pencil grip may be awkward, fistlike, or tight.
- Avoid writing.
- Have slow or poor recall of facts. Have a hard time processing information.— May seem like he or she is not following directions or listening.

### **High school**

Students in high school may:

- Read very slowly with many inaccuracies. May turn into a behavior problem to avoid reading.
- Continue to spell incorrectly, or frequently spell the same word differently in a single piece of writing.
- Avoid tests that require reading and writing, and procrastinate on reading and writing tasks.
- Have trouble preparing summaries and outlines for classes.
- Work intensely on reading and writing tasks.
- Have poor memory skills and complete assigned work more slowly than expected. Have a hard time processing information.—May seem like he or she is not following directions or listening.
- Have an inadequate vocabulary and be unable to store much information from reading.

# Dyslexia Process

## I. Contacting the Building Interventionist

1. If a teacher notices dyslexia indicators in a student, he or she will contact the Building Interventionist. Together, the Interventionist and the Classroom Teacher will collaborate to determine what instructional strategies/plans should be put in place.

2. If, after an appropriate period of time, the student is still not making sufficient progress, the Interventionist will complete a screening of the student. *Progress monitoring should occur at least once every 2 weeks. If the student is not making progress towards grade level expectations, he or she is not making adequate progress*

## II. Initial Screening

Initial screening is the first step in identifying the students who are at risk for learning difficulties. Initial screening measures consist of informal probe(s) - Acadience (K-6) and other Screening Assessments and appropriate informal inventories for Phonological Processing Skills, Reading and Spelling (7-12) - given to all students to identify those at risk or at some risk for not meeting grade level standards. Initial screeners are designed to be a *quick assessment of reading risk*.

### **Who will be screened?**

1. Each student in kindergarten through grade two (K-2);
2. Kindergarten through grade 2, (K-2) students who transfer to a new school and have not been screened;
3. Kindergarten through grade 2 (K-2) students who transfer from another state and cannot present documentation that the student has had similar screening;
4. A student in grade three or higher experiencing difficulty, as noted by classroom teacher.

### **Exemptions:**

1. Students with an existing dyslexia diagnosis.
2. Students with sensory impairment.

### **Components to be Assessed:**

The initial screening of students shall be performed with fidelity and include without limitation (Ark. Code Ann. § 6-41-603):

- Phonological and Phonemic Awareness - the ability to recognize and manipulate the sound system in spoken language
- Alphabet Knowledge - the ability to automatically recognize and name the 26 lowercase and 26 uppercase letters with ease and accuracy.
- Sound Symbol Recognition -to automatically produce sound(s) or grapheme names (grade level letters or letter clusters) during recognition, production, and/or writing tasks.
- Decoding Skills – the ability to translate words, word parts, or nonwords into their corresponding pronunciation.
- Rapid Naming - the ability to quickly name aloud a series of familiar items
- Encoding -The ability to translate spoken language into print. (spelling)

**Based upon universal screenings:**

**Grades K-12:**

If a student has deficit areas, a committee member will notify the parent of concerns and Response to Intervention (RTI) will be put in place for a student.

Tier I – Core Instruction

Tier II – Supplemental Intervention

Tier III – Intensive Intervention

If a student in K-12 does not adequately respond to RTI in any tier or concerns arise based upon Acadience (or other screening assessments), additional screening and data gathered, a trained professional is justified to determine if characteristics of dyslexia are present. Within each tier, the team will review student records and progress, inform parents of concerns, and obtain parental consent when additional assessments are needed to determine if characteristics of dyslexia exist.

### III. Level One - Collecting Data

1. Give (and collect from) classroom teacher/s the “Teacher Observation Questionnaire for Dyslexia” form

2. Compile a Permanent Record/Cumulative folder that will include (if have not compiled already):

- Teacher Observation Questionnaire for Dyslexia form
- Attendance
- Vision screening
- Hearing screening
- Teacher reports/report cards
- Classroom based assessment
- Standardized test results
- Results of intervention strategies
- Samples of student work

3. Students who score at risk or some risk on any area, additional diagnostic testing may need to be completed. Depending on the age and needs of the student, the RTI team may decide he or she needs a Level 1 (95% Groups’ PSI/PASI, Scholastic’s CORE Phonics Survey, Kilpatrick’s PAST, TOWRE, WIST) or Level 2 screener. Bypassing a Level 1 dyslexia screening and proceeding to a Level 2 dyslexia screening for older students could have many benefits. For older students, those in grades 3 and up, it may be more difficult to find age and grade appropriate curriculum-based measures and informal diagnostic inventories or checklists for an accurate identification. Proceeding to a Level 2 dyslexia screening using standardized norm referenced assessments allows a comparison of the student’s performance on the individual components to other students the same age and grade. Administering a level II dyslexia screening for an older student, may be a more efficient use of the student’s time.

## IV. Level Two - Dyslexia Evaluation

1. Once data has been collected by the Interventionist, he or she will arrange a meeting with the RTI Team Members to discuss the cumulative folder/data and the following criteria/factors:

- The child has received effective classroom instruction;
- The student has adequate intelligence or the ability to learn;
- The lack of progress is not due to sociocultural factors such as language differences, irregular attendance, or background experiences.

2. If additional screening is deemed necessary, the Interventionist will give (and collect from) parent/s the "Parent Interview" form and the "Parent Consent" form.

3. Once parent information is collected, the student will be screened.

4. Once screening has been completed, data will be recorded on the "Characteristic Profile of Dyslexia" form.

5. Arrange for another meeting with Committee Members to review "Characteristic Profile" and other data in Cumulative Folder. The team will also consider these five questions based upon the identification components to determine if the student is "exhibiting the characteristics of dyslexia".:

- Does the student demonstrate one or more of the primary reading characteristics of dyslexia in addition to a spelling deficit?
- Are the reading and spelling difficulties the result of a phonological processing deficit?
- Are the reading, spelling, and phonological processing deficits unexpected? Does the student demonstrate cognitive ability to support age level academic learning (include other academics like math)?
- Are there secondary characteristics of dyslexia evident in reading comprehension and written expression?
- Does the student have strengths that could be assets? Are there coexisting deficits that may complicate identification and the response to intervention and may deserve further assessment and intervention?

6. If information from the screening indicates a student "exhibits characteristics of dyslexia" (first three questions answered with a "yes"), the student shall be considered to be exhibiting the characteristics of dyslexia and should be provided intervention services using a dyslexia program delivered with fidelity.

7. Monitor student progress/documentation.

\*May contact additional resources: Tanya Newton at Arch Ford and Vicki King at ADE.



## **V. 504/SPECIAL EDUCATION**

### **Dyslexia and 504:**

"If it is determined that the student has functional difficulties in the academic environment due to characteristics of dyslexia, the necessary accommodations or equipment for the student shall be provided under Section 504 of the Rehabilitation Act of 1973 (Ark. Code Ann. § 6-41-603) as they existed on February 1, 2013, if qualified under the applicable federal law. In other words, having a learning problem does not automatically qualify a student for accommodations/equipment under Section 504. The impairment must substantially limit one or more major life activities in order to be considered a disability under Section 504. The determination of substantial limitation must be made on a case-by-case basis with respect to each individual student. The Section 504 regulatory provision at 34 C.C.F.R. 104.35 (c) requires that a group of knowledgeable persons draw upon information from a variety of sources in making this determination." (Arkansas Dyslexia Resource Guide, 2017, p. 24) Students who are reading far below grade level will likely struggle with grade level content unless accommodations are officially put place through an official plan. Students in grades 3 and above are required to read to learn content, so a 504 plan should be seriously considered for these students.

### **Dyslexia and Special Education:**

Students in special education are not exempt from dyslexia screening or dyslexia intervention. If a student has an IEP in reading and dyslexia indicators are present in the classroom, once the Interventionist is contacted by classroom teacher, the Interventionist may skip initial screening step and begin with "collecting data" step. If a student is already in special education, we may already have enough information in the student's folder to say he or she is exhibiting characteristics of dyslexia. If required components are already included in previous testing information, and this information indicates the student exhibits characteristics of dyslexia (first three questions answered with a "yes"), the student shall be considered to be exhibiting the characteristics of dyslexia and should be provided intervention services using a dyslexia intervention program delivered with fidelity. If there isn't enough information, we will need to assess the missing components and meet to determine if the child is exhibiting characteristics of dyslexia.