Serving students at-risk for Dyslexia Guidance to LEAs

As stated in the Department of Elementary and Secondary Education (DESE) strategic plan, our mission is to guarantee the superior preparation and performance of every child. High-quality literacy instruction is essential in accomplishing this mission.

The purpose of this document is to provide guidance to local education agencies (LEAs) for identifying and servicing students at-risk for dyslexia or related disorders in accordance with the provisions of Section 167.950, RSMo. Nothing in this document should be used to supplant or postpone the IDEA or Section 504 eligibility determination process should a disability be suspected.

Given that Missouri is a local control state, LEAs (school districts and charter schools) have considerable autonomy with regard to which screening and diagnostic tools are used as well as what instructional methods and programs to implement. However, DESE is charged with providing definitions related to best practices for dyslexia identification and remediation. This text shall support that charge. Additional releases to this document may be necessary after feedback is received from LEAs and other pertinent stakeholders.

Several other states have recently released guidelines for identification and servicing students atrisk for dyslexia. The New Jersey Dyslexia Handbook (September 2017) and California Dyslexia Guidelines (October 2017) provide evidence-based screening and instructional information and were used to inform this document.

- http://www.state.nj.us/education/specialed/dyslexia/NJDyslexiaHandbook.pdf
- https://www.cde.ca.gov/sp/se/ac/documents/cadyslexiaguidelines.pdf

Universal Screening and Early Dyslexia Identification

In the 2018-19 school year and subsequent years, each public school, including each charter school, shall conduct dyslexia screenings for students in the appropriate year consistent with the findings and recommendations of the task force created under section 633.420. "Dyslexia screening" is a short test conducted by a teacher or school counselor to determine whether a student likely has dyslexia or a related disorder in which a positive result does not represent a medical diagnosis but indicates that the student could benefit from approved support.

Purpose of Universal Screening

Data from the National Institute of Child Health and Human Development (NICHD) indicate that brain plasticity decreases over time, therefore early intervention is essential to close the gap between struggling readers and their "normally developing" peers (Stanovich, 1986).

- Identify students who are at risk for dyslexia or reading failure
- Form small groups for instruction and intervention
- Plan instruction and intervention
- Set individual goals for student achievement
- Set exit criteria for intervention window

Who should be screened?

Task Force's recommendations are that LEAs screen

- Each student kindergarten through grade 3 each year.
 - o Grades 1-3 should be screened within the first 30 days of the school year, with follow up at the middle and end of the year for systematic documentation of progress or lack of progress.
 - o Kindergarten initial screening should occur no later than January 31st and also at the end of the year for systematic documentation and progress monitoring.
- Any student K-3 who transfers from a school within the state that has not previously been screened.
- Any student K-3 who transfers from another state and cannot present documentation that the student has a previous screening.
- A student in grades 4 or higher who is experiencing consistent difficulty in the areas of weakness noted previously in this report as determined by the classroom teacher or as requested by the student's parent/guardian.
- Exemptions
 - Existing diagnosis of dyslexia
 - Students with a sensory impairment

Data Collection

• Information related to the collection of screening data will be released in a separate document.

English Learners (ELs)

• As dyslexia is neurobiological in nature, it affects all people, not just English speakers. Students for whom English is not their native language will also be potential students with dyslexia characteristics. Many times, these students are missed because the difficulties in reading can be erroneously blamed on language acquisition. Although the process can be difficult and implemented with caution, English learners (ELs) can be screened for dyslexia-related risk factors through screening in the student's native language.

Screening Components from the International Dyslexia Association

- https://app.box.com/s/dlwc9359ba6dz89bi0i3pzsbvmithatc
- https://dyslexiaida.org/universal-screening-k-2-reading/

There is no one test or tool that encompasses all the recommended skills. Any screening tool(s) selected must have evidence of adequate reliability and validity. Administration, scoring and interpretation should be completed in accordance with the directions, norms and cut points provided with the instrument.

Screening of the following skills is essential to identifying deficits related to dyslexia, and to guide intervention (please see appendix B;-Screening Organizer for further details).

Kindergarten

- Phonological awareness (words, syllables, rhyming, onset-rime, blending, and syllable and word segmentation)
- Sound/symbol recognition
- Alphabet knowledge (letter naming fluency)
- Phonological memory (non-word repetition)
- Rapid automatic naming
- Reading comprehension

First Grade

- Phonological awareness (segmentation, blending, isolation, manipulation)
- Sound/symbol recognition
- Alphabet knowledge (letter naming fluency)
- Phonological memory (non-word repetition)
- Word recognition fluency

- Orthography
- Reading comprehension

Second & Third Grades

- Oral reading fluency
- Word recognition
- Reading comprehension
- Orthography