Mount Laurel Township School District

# DYSLEXIA SCREENING PROCEDURES HANDBOOK

RESOURCES AND GUIDELINES March 2024





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# DYSLEXIA SCREENING PROCEDURES HANDBOOK

Overview

This dyslexia handbook has been developed in consultation with Child Study Team personnel, reading specialists, and administrators within the Mount Laurel Township School District in order to provide information and resources on dyslexia for teaching staff and parents/caregivers.

Information has been gathered from professional journals, current research, and diagnostic materials in the public domain as well as available information presented by the New Jersey Department of Education in an effort to address questions and provide guidelines for supporting struggling readers.

In an effort to provide clarity for teachers and parents/caregivers, this handbook has been developed to address specific questions and information regarding dyslexia. This handbook presents definitions, common indicators of dyslexia, and strategies for teachers and parents/caregivers. Procedures for obtaining instructional support in our schools are outlined within this handbook.

# GUIDELINES FOR SCREENING AND INSTRUCTION FOR DYSLEXIA AND RELATED DISORDERS

# The Definition

"Dyslexia is a specific learning disability that is neurobiological 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).

# **Dyslexia Further Defined**

Further investigation indicates that dyslexia is a subset of the classification of Specific Learning Disability. According to Steven G. Feifer, DEd, NCSP, ABSNP and Douglas A. Della Toffalo, Ph.D., ABSSNP in their book *Integrating RTI with Cognitive Neuropsychology: A Scientific Approach to Reading* (2007) there are **3 subtypes of dyslexia**:

- **Dysphonetic Dysterior** is the inability to utilize a phonological route to successfully bridge letters and sounds. It is rooted in the area of auditory processing and involves the inability to hear and discriminate between sounds. However, it is not due to a conductive hearing loss.
- **Dyseidetic Dyslexia** is often defined as word-formed dyslexia. These learners are able to sound out words but lack the ability to accurately and automatically recognize words in print. Fluency may suffer due to the difficulty in processing words. These students may complain of vision fatigue, reversals or transposing of letters when they read.
- **Mixed Dyslexia** is a combination of both Dysphonetic Dyslexia and Dyseidetic Dyslexia. It is the most severe in that it allows for no usable key to unlock the reading code. These readers are unable to phonetically process or automatically recognize words. Reading rate is slower and comprehension is impacted.

It should be noted that the interventions developed for each of these subtypes will need to be different in order to be effective.

#### The Law

The NJ dyslexia screening law states, "A board of education shall ensure that each student enrolled in the school district who has exhibited **one or more** potential indicators of dyslexia or other reading disabilities is screened for dyslexia and other reading disabilities using a screening instrument selected pursuant to section 2 of this act no later than the student's completion of the first semester of the second grade" (New Jersey Dyslexia Handbook, 2017). A Screening for Dyslexia Flowchart is included in this handbook.

# POTENTIAL INDICATORS FOR DYSLEXIA, BY GRADE/LEVEL:

Grade/Level	Characteristics/Difficulties may include			
Preschool Years	<ul> <li>Trouble learning common nursery rhymes, such as "Jack and Jill"</li> <li>Difficulty learning (and remembering) the names of letters in the alphabet</li> <li>Seems unable to recognize letters in his/her own name</li> <li>Mispronounces familiar words; persistent "baby talk"</li> <li>Doesn't recognize rhyming patterns like <i>cat</i>, <i>bat</i>, <i>rat</i></li> <li>A family history of reading and/or spelling difficulties (dyslexia often runs in families)</li> </ul>			
Kindergarten and First Grade	<ul> <li>Reading errors that show no connection to the sounds of the letters on the page—will say "puppy" instead of the written word "dog" on an illustrated page with a picture of a dog</li> <li>Does not understand that words come apart</li> <li>Complains about how hard reading is; "disappears" when it is time to read</li> <li>A history of reading problems in parents or siblings</li> <li>Cannot sound out even simple words like <i>cat</i>, <i>map</i>, <i>nap</i></li> <li>Does not associate letters with sounds, such as the letter b with the "b" sound</li> </ul>			
Second Grade through High School	<ul> <li>Reading</li> <li>Very slow in acquiring reading skills. Reading is slow and awkward</li> <li>Trouble reading unfamiliar words, often making wild guesses because he/she cannot sound out the word</li> <li>Doesn't seem to have a strategy for reading new words</li> <li>Avoids reading out loud</li> </ul>	<ul> <li>Speaking</li> <li>Searches for a specific word and ends up using vague language, such as "stuff" or "thing," without naming the object</li> <li>Pauses, hesitates, and/or uses lots of "um's" when speaking</li> <li>Confuses words that sound alike, such as saying "tornado" for "volcano," substituting "lotion" for "ocean"</li> <li>Mispronunciation of long, unfamiliar or complicated words</li> <li>Seems to need extra time to respond to questions</li> </ul>	<ul> <li>School and Life</li> <li>Trouble remembering dates, names, telephone numbers, random lists</li> <li>Struggles to finish tests on time</li> <li>Extreme difficulty learning a foreign language</li> <li>Poor spelling</li> <li>Messy handwriting</li> <li>Low self-esteem that may not be immediately visible</li> </ul>	

(Shaywitz, 2020, p. 122-125)

# COMMON STRENGTHS IN CHILDREN WITH DYSLEXIA

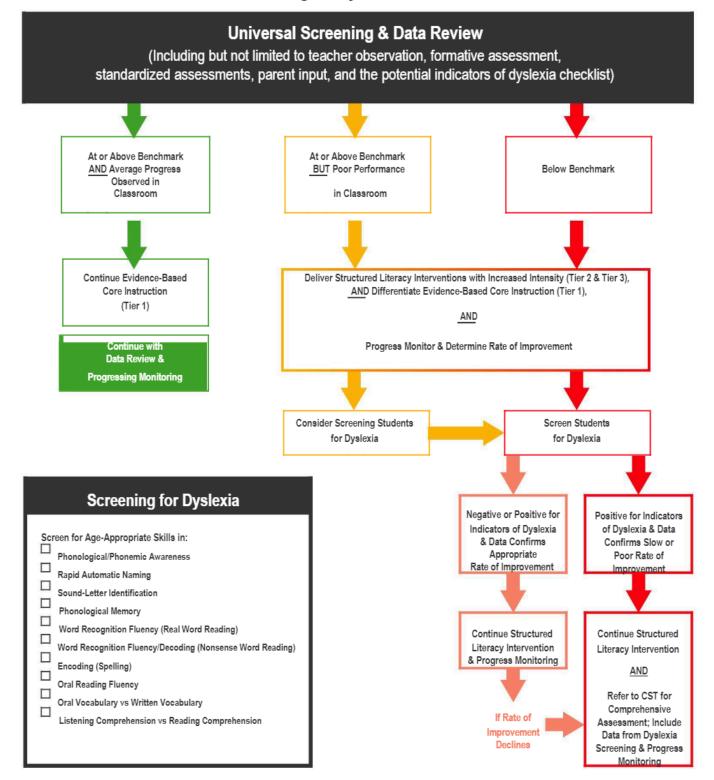
Research has shown that building on strengths is highly effective. Drexel University conducted studies highlighting dyslexic strengths. They learned that when teachers became aware of their students' creative strengths, positive changes occurred in their teaching and student interactions, as well as positively affecting student self-efficacy (Reussman & Bach 2002). Common strengths seen may be:

- Highly creative
- Links previously unrelated ideas, processes
- Finds new ways to do old things
- Problem Solver
- Inventor
- Builder
- Diplomat
- Good sense of humor
- Likes and enjoys helping people
- May anticipate people's emotions
- Excels at individual sports
- Works better alone than with a team
- Understands animals, plants, and living things
- Mechanically inclined
- Wants to know how things work
- Likes to repair or make things better
- Enjoys working with hands
- Likes building things
- Scientific thinker
- Very curious and observant
- A good motivator
- High high energy
- Enthusiastic
- Is open-minded

(Shaywitz, 2020, p. 122-125)

# PROCEDURES FOR DYSLEXIA IDENTIFICATION

# Screening for Dyslexia Flowchart



(New Jersey Dyslexia Handbook, 2017)

#### Step 1- Universal Screening & Data Review

Universal screening and data review includes, but is not limited to;

- the use of a universal screener for reading
- teacher observation
- formative assessment
- standardized assessments
- parental/caregiver input
- the potential indicators of dyslexia

All students are screened using at least one of the district-approved universal screener tools:

- Teachers College Phonic Decoding Assessment (Grades K-3)
- Teachers College Decodable Running Record (Grades K-3)
- Fountas & Pinnell Benchmark Assessment System (Grades K-6)
- STAR 360 Reading (Grades 2-8)

#### Data Review:

Students who are: *Above/At benchmark* and performing *on level* in class shall continue with Tier 1 instruction within the general education classroom.

• The general education classroom teacher shall continue with data review and progress monitoring.

Students who are: *At/Above benchmark* but *low performing* in class shall be moved to Tier 1 instruction with differentiation and moved to Tier 2 intervention if needed, in collaboration with the school counselor, ESL teacher, Literacy Support teacher, speech pathologist, and classroom teacher(s). This instructional team will rule out other possible causes for poor progress by answering these questions:

- Does the student come to school regularly? If not, why not?
- Is the lack of English proficiency the reason for lack of progress?
- Has the student had adequate experiential background in the home environment?
- Are other students in the same class making appropriate academic progress?
- Have vision/hearing difficulties been ruled out?
- Further, the <u>general education classroom</u> teacher shall continue with data review and progress monitoring.
- If the rate of improvement is slow, the student shall be further screened for dyslexia.

Students who are: *Below Benchmark* shall receive Tier 2 intervention and continue progress monitoring. **Student shall be further screened for dyslexia.** 

- If a student shows indicators for dyslexia but is showing a positive rate of improvement, the student shall continue structured literacy intervention in Tier 2 and progress monitoring.
- If rate of improvement is slow or declines, a request for assistance shall be made to the Intervention and Referral Services Committee (I&RS), which would include data from dyslexia screening and progress monitoring while continuing structured literacy interventions.
- Further, the <u>general education classroom</u> teacher shall continue with data review and progress monitoring.

### **Dyslexia Screening:**

Screening for dyslexia includes age-appropriate skills in phonological and phonemic awareness; rapid automatic naming; sound letter identification; phonological memory; word recognition fluency, or real word reading; word recognition fluency and decoding, or nonsense word reading; encoding, or spelling; oral reading fluency; oral vocabulary versus written vocabulary; and listening comprehension versus reading comprehension.

The NJ dyslexia screening law states, "A board of education shall ensure that each student enrolled in the school district who has exhibited one or more potential indicators of dyslexia or other reading disabilities is screened for dyslexia and other reading disabilities using a screening instrument selected pursuant to section 2 of this act no later than the student's completion of the first semester of the second grade" (NJ Dyslexia Handbook, 2017).

# Step 2- Intervention and Referral Services Review

A request for assistance shall be made to the Intervention and Referral Services Committee (I&RS) for consideration for Tier 3 intervention for students who are identified by the district's universal reading screening tools as below benchmark and are not making sufficient progress with Tier 2 interventions, or are at or above benchmark but are performing poorly in class and are not considered "likely on track".

- Students will be reviewed by the I&RS committee
- Background data will be collected
- Committee will develop an intervention plan including specific goals based on data from screeners administered. A progress monitoring schedule will be set to review the data from the plan. Plan will be reviewed in 6-8 weeks.
- Additional screening instruments may be administered.

# Step 3 - RTI & Progress Monitoring

Progress monitoring is:

The ongoing review of progress to assess student outcomes, determine the effectiveness of academic and behavioral interventions, and determine the rate of student improvement which includes:

- A selection of progress monitoring tools and procedures that are implemented accurately and measure incremental growth;
- An established timeline for monitoring student progress;
- Regularly scheduled meetings to review data; and
- Review, and revise as needed, the action plan for student improvement.

(New Jersey Tiered System of Supports, 2019)

Data from progress monitoring should be used to inform student movement through tiers. For example, progress monitoring data obtained during the course of intervention should be analyzed for level of performance and growth status. If student data reflects performance **at or above benchmark**, the student may return to Tier 1. If the student is **performing below benchmark**, but making sufficient growth progress, the decision to continue Tier 2 intervention can be made. If the student is **performing below benchmark and demonstrates poor growth**, a change in the Tier 2 intervention or movement to a Tier 3 intervention may be considered.

#### Step 4 - CST Evaluation

Any student that does not show sufficient growth and response to intervention and demonstrates positive indicators of dyslexia, should be referred to the Child Study Team for a full Child Study Team Evaluation.

Students may be referred to the district's Child Study Team at any time for a formal, comprehensive evaluation for a specific learning disability, if the student is not making growth at a sufficient rate of improvement. Parents/caregivers may also request a formal CST evaluation at any time.

- CST Evaluation
- Classify if criteria is met
  - Develop Individualized Education Plan (IEP)

# WHAT CAN A PARENT/CAREGIVER DO TO HELP A CHILD WITH DYSLEXIA?

#### Help your child understand the nature of his/her difficulty:

- Read books or view videos about dyslexia.
- Emphasize the child's abilities instead of "disabilities".
- Help them understand that their difficulties are not their fault and/or that they are not "stupid".

#### Help other members of the family:

• Help others recognize and understand your child's learning disability. Family members often ask "who, what, where, and when" questions to get the necessary information.

#### Help your child locate and develop other talents:

- Sports, art, music, mechanics, hobbies, etc.
- Help improve your child's self-image by giving your child tasks he/she can master.
- Give the child chores to do (e.g., setting the table for supper, clearing the dishes, and making the beds).
- Make short lists of tasks to help the child remember. A list is impersonal and reduces irritations. The child will gain satisfaction as he checks off tasks completed.
- Often children do not process multiple requests quickly or accurately. State your ideas in simple, clear, one-concept commands and ask the child to repeat what was said. Speaking at a slower rate of speed to the child is often helpful.

#### Structure the child's life at home:

- Stick to a regular routine for meals, play, TV, chores, homework, etc.
- Keep belongings in the same place. Help the child remember where to put them.
- Keep instructions simple- one at a time.
- Break tasks into small parts or steps.
- Relieve stress in weak areas.
- Guard against negative remarks, especially those referring to laziness or lack of effort.
- Avoid threats of punishments for such things as low grades, their need for repetition of directions, ineptness at simple tasks, etc.
- Set standards, goals, and expectations of achievement within reach of your child's abilities.

#### How can parents/caregivers build self-esteem?

- Praise your child often and sincerely.
- Catch your child doing well.
- Praise efforts that are working towards a goal.
- Don't compare your child with anyone else.
- Look for ways to make your child feel capable.
- Encourage your child to make age appropriate decisions.
- Give your child a chance to solve problems before jumping in.
- Listen to your child's thoughts, feelings, and ideas without judging or criticizing.

# FREQUENTLY ASKED QUESTIONS

#### Who do I contact if I have questions about dyslexia and I want my child to be tested?

Contact your child's principal. They will be able to answer your initial questions and help initiate a screening and the request for assistance process if warranted.

#### How will the school know whether my child should be referred for a dyslexia evaluation?

Your child's teacher provides ongoing assessments that compares your child to grade level standards and expectations. Universal screeners are used for all students to identify areas of weakness and strengths. Benchmark data is collected and progress is monitored in all academic areas, including reading, writing and math. Parent/caregiver information and concerns are noted. The identification process via the Intervention and Referral Services (I&RS) committee will be initiated and followed.

# Does my child have to be at a certain grade level before a dyslexia evaluation is completed?

No, your child may be screened as early as kindergarten. Screenings may be administered through high school and evaluations may occur, if needed.

#### What causes dyslexia?

While the exact cause of dyslexia is not completely clear, scientists tell us that it is neurobiological in origin. Dyslexia is not caused by general low intellectual ability, lack of instruction or family issues but rather by specific difficulties in processing.

#### What dyslexia services will my child have if they are identified with dyslexia?

Services may be recommended for your child if evaluations have identified them as having characteristics of dyslexia. These services may include an intervention plan to address learning needs, supports/accommodations in the classroom and/or an Individual Education Plan (IEP) if eligible for classification.

#### What if I had my child tested by an outside source. May I share that with the school?

Assessment by outside evaluators may be shared by parents/caregivers and will be considered by the school. The assessment does not automatically create eligibility. The school Child Study Team (CST) determines eligibility based on a review of all the data and a variety of sources.

#### What is the criteria for special education (IEP) services?

First, the student must be determined to have one or more of the disabilities defined in the NJ Administrative Code Title 6A, Chapter 14. Second, the student's disability must adversely affect their educational performance. Third, the student must need special education and related services. Students must meet all (3) criteria in order to be eligible for Special Education and Related Services. Eligibility is determined collaboratively by the participants described at N.J.A.C. 6A:14-2.3(k)1.

#### Is assistive technology appropriate for my child?

Assistive technology may be considered as a support for students identified as demonstrating characteristics of dyslexia. Accommodations such as computer programs allowing for speech to text apps, as well as other specialized apps and platforms may be considered. In addition, audiobooks are often used to support students.

#### How are students identified as dyslexic?

Universal screening is provided for all students beginning in kindergarten and first grade. When areas of weakness are identified based on data collected by the classroom teacher, further screening and consultation with the reading specialist is recommended to address student needs. Progress monitoring and data collection begins.

Based on progress, a referral to the school I&RS committee is recommended where a decision for more extensive dyslexia screening is considered.

Based on the results of this screening, an intervention plan is developed and monitored in order to address the student's reading difficulties.

Student growth is monitored and data recorded. Further testing may be requested by the I&RS team making a referral to the Child Study Team.

If the student is identified through a child study team evaluation as having a specific learning disability with characteristics of dyslexia, and requires special education then an Individualized Education Program (IEP) will be developed.

#### My child has been diagnosed with ADHD and anxiety. Can he/she still be dyslexic?

Yes, it is possible for a student to have a diagnosis in other areas. However, in order to determine if this exists, further assessments may be necessary.

#### Do emotional disorders cause dyslexia?

No. Research indicates that dyslexia is caused by biological factors not emotional or family issues. However, emotional problems can appear when a student becomes frustrated and is struggling to learn. The pain of failure often causes anxiety and feelings of self-doubt.

#### What instructional program should be provided to students identified as dyslexic?

There is not one program that is recommended for students identified as dyslexic. All students should be offered a balanced, comprehensive literacy program including:

- Phonemic Awareness
- Phonics
- Comprehension
- Fluency
- Vocabulary
- Background Knowledge

In addition, strategies focusing on specific needs within the student's profile should be provided to address deficits identified. A variety of programs and interventions may be reviewed and developed to determine the best approach to meet the student's needs depending on the subtype of dyslexia, as well as providing accommodations and modifications as needed.

#### REFERENCES

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# Potential Indicators of Dyslexia Checklist

This checklist is designed to aid educators in identifying students with characteristics or potential indicators of dyslexia and to document any skill deficits confirmed during screening to inform instruction. Check all areas of consistent difficulty, based on observation, assessment history, progress monitoring data, and work samples. It is likely that many students will exhibit some of the behaviors on this checklist. A preponderance of checks in one area suggests further examination into this set of skills.

Student Name:

Teacher Name:

Date:

YES	NO	Background Information & Characteristics	
		amily history of dyslexia or learning challenges	
		Student scored below benchmark on universal screening measure	
		Student is performing poorly in the classroom	
		Student progress monitoring data shows slow or poor rate of improvement	

	Late learning to talk or slow to learn new words	
	Trouble pronouncing speech sounds (such as /th/, /r/, /l/, and /w/)	
	Mixing up the sounds and syllables in long words (says "aminal" for "animal")	
	Avoids letters or confuses them	
	Cannot recall sounds of letters	
	Unable to break words into separate speech sounds (cat has 3 sounds /c/ /ă/ /t/)	
	Cannot identify or create words that rhyme	
	Doesn't know letters in own name	
	Confused about the meanings of the words - who, what, where, when	
	Disinterested in books, read aloud or word play activities	

Kindergarten & 1st Grade

	Difficulty remembering the names of letters and recalling them quickly		
	Difficulty learning sound-letter correspondence		
	Difficulty with phonemic awareness tasks (such as blending or breaking words into separate speech sounds, flash = /f/, /l/, /ä/,/sh/)		
	Difficulty learning to recognize common words automatically (family names, names on signs or objects, high frequency words)		
	Reading errors show no connection to the sounds of the letters (reads "rabbit" as "bunny")		
	Poor spelling (omitting sounds, substituting sounds, adding sounds, transposal of sounds)		
	Difficulty remembering sequences (days of the week, months, ABCs)		
	Poor handwriting		

	Frequently misreads common high frequency words even after practice (when, went, they, their, been, to, does, said, what)	
	No strategies for word attack; makes wild guesses at words; relies heavily on the context or pictures in a story to "read"	
	Difficulty decoding words, often making single sound errors, omitting syllables, or skipping over prefixes and suffixes	
	Mispronunciation of long, unfamiliar words	
	Loses place and skips over words while reading	
	Use of imprecise language (says "stuff")	
	Persistant reversals and transpositions of letters, numbers, and words with similar visual appearance (such as b & d, 6 & 9, was & saw)	
	Spells phonetically without applying spelling rules or patterns	
	Poor spelling (omitting sounds, substituting sounds, adding sounds, transposal of sounds)	
	Spelling the same word different ways on the same page	
	Slow, choppy, and/or inaccurate oral reading that lacks appropriate expression	
	Comprehension problems arising from poor word recognition	
	Beginning to avoid reading and writing tasks	
	Difficulty with math facts	

# Potential Indicators of Dyslexia Checklist - Continued

Student Name:

Teacher Name:

Date:

	YES	NO	Background Information & Characteristics
4th through 6th Grades			Slow on oral reading fluency tests
			Inaccurate reading of real and nonsense word lists (pem, loit, thwadge)
			Poor spelling (omitting sounds, substituting sounds, adding sounds, transposal of sounds)
			Poor handwriting and written expression
thro			Avoidance of reading
4t			Weak in reading strategies
			Weak reading comprehension compared to listening comprehension
			Slow and laborious reading
			Poor spelling (omitting sounds, substituting sounds, adding sounds, transposal of sounds)
des			Difficulty with note-taking
Grades			Overwhelmed by multiple assignments
7th through 12th			Cannot work fast enough to cope
, ubr			Lack of effective strategies for studying
hrot			Difficulty with homework completion
7th t			Difficulty with organization
			Comprehension and vocabulary deficits due to lack of practice
			Writes poorly and with great effort

Student Profile: Screening for Dyslexia			
Screen for Age-Appropriate Skills in:	Area of Concern? Y/N	Tool Used to Assess	
Phonological/Phonemic Awareness			
Rapid Automatic Naming			
Sound-Letter Identification			
Phonological Memory			
Word Recognition Fluency (Real Word Reading)			
Word Recognition Fluency/Decoding (Nonsense Word Reading)			
Encoding (Spelling)			
Oral Reading Fluency			
Oral Vocabulary*			
Written Vocabulary			
Listening Comprehension**			
Reading Comprehension			

\* Students with dyslexia may display stronger oral language skills than written language skills.

\*\* Students with dyslexia may display stronger listening comprehension skills than reading comprehension skills.

(New Jersey Dyslexia Handbook, 2017)